

Microcensus 2025



Core programme and survey component relating to income and living conditions

Question overview for information purposes

Topic: Household and dwelling

Question 1

Are there any other households in your dwelling apart from your own, e.g. subtenants?

Other households in your dwelling consist of people with whom you do not live together or maintain a joint household. People living in a shared dwelling should usually be treated as separate households.

Yes, number of other households

No, no other households

Question 2

How many people in total were living in your household on Thursday of the reference week?

People who are temporarily away from home, for instance for job or health reasons, are part of your household if that is where they usually live. Subtenants, visitors and domestic staff are not household members.

Number of people in your household

Question 3

Who are the members of your household? Please fold out the flap at the side of page 2 and enter their names.

If more than 5 people live in the household, please contact the statistical office to request an extra questionnaire. The contact details are given on the front cover.

Question 4

What is your sex, as stated in the birth register?

Male

Female

Gender diverse

Not stated in the birth register

Question 5

When were you born?

Month

Year

Question 6

Is your birthday before the last day of the reference week in 2025?

(Voluntary question)

Yes

What is your marital status?

Single

Married

Widowed

Divorced

Registered life partnership

Registered life partner has died

Registered life partnership has been dissolved

Question 8

Do you occupy at least one more dwelling (including room, accommodation, residential establishment)?

Please mark all relevant boxes.

Yes, I have another dwelling in Germany.

Yes, I have another dwelling abroad.

No, I do not have another dwelling.

Ouestion 9

Is this dwelling your main residence?

If you have more than one dwelling, your main residence is the one where you usually live (centre of social and personal life, family home).

Yes

No

Ouestion 10

Are the people in the household present or temporarily absent?

"Temporarily absent" means that people usually live in the household but are temporarily away (e.g. commuters who only come home at the weekend, students, apprentices, people in hospital/on holiday/doing volunteer service).

Present

Temporarily absent

Question 11

Has your household been interviewed for the microcensus in this dwelling within the last 12 months?

Yes

No

Question 12

Have any household members moved out since the last interview?

Yes, enter how many people moved out

Have any household members died since the last interview?

Yes, enter how many people died

No

Question 14

Did you move into this household after the last interview?

Please mark "Yes" for children born in the last 12 months.

Yes

No

Question 15

Is this dwelling the main residence of at least one person in the household who was 16 years or older on 31 December 2024?

Yes

No

Question 16

When did you move into this household, after the last interview?

Please enter the month and year of birth for children born in the last 12 months.

Month

Year

Not applicable as I was living in the household before the last interview.

Question 17

Which life situation applied to you when you moved in?

In employment

Other life situation

Question 18

Have any household members moved out in the last 12 months?

Yes, enter how many people moved out

Ouestion 19

Please enter the first name of each person who moved out as well as the following information:

Person 1

First name of the person who moved out

Move-out month

Move-out year

Where did the person move to?

(Voluntary question)

To another private household

To a collective household (e.g. residential establishment, old people's home)

Abroad

To an unknown place

Person 2

First name of the person who moved out

Move-out month

Move-out year

Where did the person move to?

(Voluntary question)

To another private household

To a collective household (e.g. residential establishment, old people's home)

Abroad

To an unknown place

Person 3

First name of the person who moved out

Move-out month

Move-out year

Where did the person move to?

(Voluntary question)

To another private household

To a collective household (e.g. residential establishment, old people's home)

Abroad

To an unknown place

Person 4

First name of the person who moved out

Move-out month

Move-out year

Where did the person move to?

(Voluntary question)

To another private household

To a collective household (e.g. residential establishment, old people's home)

Abroac

To an unknown place

Person 5

First name of the person who moved out

Move-out month

Move-out year

Where did the person move to?

(Voluntary question)

To another private household

To a collective household (e.g. residential establishment, old people's home)

Abroad

To an unknown place

Ouestion 20

Have any household members died in the last 12 months?

Yes, enter how many people died

No

Question 21

Please enter the first name of each person who died:

Person 1

Name of the 1st person who died

Person 2

Name of the 1st person who died

Person 3

Name of the 1st person who died

Person 4

Name of the 1st person who died

Person 5

Name of the 1st person who died

Question 22

Have any people moved into your household between 1 January 2024 and today?

Yes

No

Question 23

In what month and year did the last person move into your household?

Month

Year

Which life situation applied to this person when this person moved in?

In employment
Other life situation

Question 25

Have any people moved out of your household since 1 January 2024?

Yes

No

Question 26

When did the person who last moved out move out?

Move-out month Move-out year

Topic: People and household

Question 27

Do you live in a one-person household?

Yes

No

Question 28

Does your mother live in this household?

This includes stepmothers, adoptive and foster mothers.

Yes, my mother is number (see flap)

No

Question 29

Does your father live in this household?

This includes stepfathers, adoptive and foster fathers.

Yes, my father is number (see flap)

No

Question 30

Does your spouse live in this household?

Yes, my spouse is number (see flap)

Does your partner live in this household?

This includes registered life partnerships.

Yes, my partner is number (see flap)

No

Question 32

What is your relationship to Person 1?

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I am Person 1.
I am (his/her) ...
     wife, husband
     partner
     daughter, son (including stepchildren, adopted and foster children)
     daughter-in-law, son-in-law
     granddaughter, grandson
     great-granddaughter, great-grandson
     mother, father (including stepparents, adoptive and foster parents)
     mother-in-law, father-in-law
     grandmother, grandfather
     great-grandmother, great-grandfather
     sister, brother
     sister-in-law, brother-in-law
     another relative by birth/marriage
     not related by birth/marriage
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Topic: Housing circumstances

When answering the questions please use the statement of incidental rental expenses, any utilities contract you may have concluded and, if applicable, your tenancy agreement.

Question 33

Is this dwelling the main residence of at least one person in the household who was 16 years or older on 31 December 2024?

Yes

What type of building does your household live in?

Detached single-family house

Single-family house as a terraced house or semi-detached house

Single-family house with an additional (granny) flat or two-family house

Residential building with 3 to 9 dwellings

Residential building with 10 or more dwellings

Other type of building

Question 35

What year was the building constructed in which you live?

This refers to the year in which the building was completed. If additions, alterations and extensions have been made to the building, the question refers to the original year of completion.

Before 1919

1919 to 1948

1949 to 1960

1961 to 1978

1979 to 1990

1991 to 2000

2001 to 2010

2011 to 2015

2016 to 2020

2021 or later

Question 36

If the building underwent a major renovation (new insulation, new roof, replacement of heating system and electrical system): what year was the renovation work completed? (Voluntary question)

Before 1919

1919 to 1948

1949 to 1960

1961 to 1978

1979 to 1990

1991 to 2000

2001 to 2010

2011 to 2015

2016 to 2020

2021 or later

Not applicable as the building did not undergo a major renovation.

What is the living floor space of the whole dwelling/single-family house?

The living floor space includes also the kitchen, bathroom, toilet, corridor, loft, relevant balcony area and sublet rooms. The living floor space does not include areas used for commercial purposes. If you live in a single-family house with an additional (granny) flat, please only count the floor space you personally use.

Floor space in full square metres

Ouestion 38

How many bedrooms, dining and living rooms are there in the dwelling/single-family house you live in?

Bedrooms, dining and living rooms do not include the kitchen, bathroom, toilet, corridor, storerooms, balconies, and rooms used for commercial purposes. If you live in a single-family house with an additional (granny) flat, please only count the bedrooms, dining and living rooms you personally use.

Number of rooms

Question 39

When did your household move into the dwelling/single-family house?

Please state the year when the occupant moved in who has lived longest in the dwelling/house. If you live in a shared dwelling please state the year when you moved in yourself.

Move-in year

Question 40

Does your household (co-)own or rent the dwelling/single-family house?

Occupants of a cooperative dwelling please indicate "tenant". If you have a right of residence, i.e. if rent-free occupation applies, please also mark "tenant".

(Co-)owner

Tenant

Question 41

Please indicate a household member who is an owner of the dwelling/the single-family house.

If two or more household members are owners of the dwelling/single-family house, please enter the number of the oldest household member.

Number of person (see flap)

Has the building you live in been improved in the last 5 years as regards its thermal insulation, windows or heating system?

(Voluntary question)

E.g. thermal insulation of external walls, roof or floor, replacement of old windows with double or triple glazed windows and installation of better and more efficient heating systems.

Yes, three or more measures

Yes, two measures

Yes, one measure

Nο

I don't know.

Question 43

If the building you live in has not been improved in the last 5 years, does it need renovation work to improve the thermal insulation, windows or heating system?

(Voluntary question)

Yes, renovation work is needed.

No, renovation work is not needed.

I don't know.

Question 44

What is the main obstacle to improving the building as regards its thermal insulation, windows or heating system?

(Voluntary question)

No interest

Too expensive

It is difficult to find professionals to do the work

Administrative obstacles

Other obstacles (e.g. protected historic building, difficult to agree with neighbours or coowners, etc.)

Question 45

Was your household still paying back loans last month for the dwelling/single-family house your household lives in?

(Voluntary question)

This includes paying back mortgages and loans under savings and loan contracts regarding the dwelling your household lives in/the living floor space your household occupies in your house. This does not include loans for the maintenance of the real property.

Yes

No

Question 46

How much did your household pay back last month on loans for the dwelling/single-family house?

(Voluntary question)

Please refer to your loan repayment plan or statement of account for the amounts. If your repayments are not made on a monthly basis, please enter the average monthly amount. If

you are repaying a loan for more than one dwelling in the building, enter only the proportion of the overall loan that refers to the dwelling your household lives in.

Loan 1

Monthly amount of interest and repayment (full euros) Monthly amount of interest (full euros)

Loan 2

Monthly amount of interest and repayment (full euros) Monthly amount of interest (full euros)

Loan 3

Monthly amount of interest and repayment (full euros) Monthly amount of interest (full euros)

Loan 4

Monthly amount of interest and repayment (full euros) Monthly amount of interest (full euros)

Question 47

What are the housing costs of the dwelling/single-family house your household lives in? (Voluntary question)

Households belonging to a commonhold association: Under incidental expenses below, please enter only costs incurred in addition to your commonhold contribution.

Monthly commonhold contribution

Commonhold contribution

No

Yes

Monthly amount (full euros)

Monthly energy costs

Electricity

No

Yes

Monthly amount (full euros)

Heating and gas

No

Yes

Monthly amount

Annual real property tax

Annual real property tax

No

Yes

Annual amount (full euros)

Annual incidental expenses

Non-life or residential building insurance

No

Yes

Annual amount (full euros)

Waste collection

No

Yes

Annual amount (full euros)

Water costs (water consumption, wastewater)

No

Yes

Annual amount (full euros)

Chimney sweep

No

Yes

Annual amount (full euros)

Street cleaning

No

Yes

Annual amount (full euros)

Annual costs of maintenance and repairs

Maintenance and repairs

No

Yes

Annual amount (full euros)

Question 48

How much are the monthly operating and incidental expenses for the dwelling/single-family house your household lives in?

Please take into account energy costs, real property tax, incidental expenses (see question 47), and commonhold contribution

Please convert any expenses to monthly amounts and then add up these monthly amounts.

Operating and incidental expenses

Question 49

What are the monthly expenses for interest on loans and for regular maintenance and repairs conducted to maintain the value of the dwelling/single-family house you live in?

If you do not incur any expenses of this type, please enter the value "0".

Loan interest, maintenance and repairs

Please indicate a household member who signed the tenancy agreement.

If the person who signed the tenancy agreement does not live in your household, please enter the number of the oldest person in your household.

Number of person (see flap)

Question 51

Which statement applies to your household regarding the rental circumstances?

(Voluntary question)

Rent-free occupation does not apply where the rent is paid by third parties (e.g. employment agency, public assistance office, parents for children). The household pays lower rent, e.g. when it has a certificate of eligibility to live in a social dwelling. The rent may be lower also for private or other reasons (e.g. flat provided by the employer, student residence).

The household occupies the dwelling rent-free (except for any incidental expenses).

The household pays lower rent (e.g. with a certificate of eligibility).

The household lives in rented accommodation at market conditions.

Ouestion 52

Has the building you live in been improved in the last 5 years as regards its thermal insulation, windows or heating system?

(Voluntary question)

E.g. thermal insulation of external walls, roof or floor, replacement of old windows with double or triple glazed windows and installation of better and more efficient heating systems.

Yes, three or more measures

Yes, two measures

Yes. one measure

No

I don't know.

Question 53

If the building you live in has not been improved in the last 5 years, does it need renovation work to improve the thermal insulation, windows or heating system?

(Voluntary question)

Yes, renovation work is needed.

No, renovation work is not needed.

I don't know.

Question 54

What is the total amount you pay to your landlord/landlady or property management agency every month?

When answering this and the following questions, please use your tenancy agreement and the statement of incidental rental expenses. If you live in a shared dwelling, each of the occupants should enter the proportion they pay.

Monthly total amount

Does the monthly total amount you pay to your landlord/landlady or property management agency include incidental rental expenses?

The incidental rental expenses include allocated costs for heating, (hot) water supply, waste collection, street cleaning, house and caretaker services, property management, gardening, staircase lighting and cleaning, lift, cable connection, real property tax, building insurance. They do not include telephone and radio and television licence fees, or rents for garages or parking spaces.

Yes

Yes, but the incidental rental expenses are not indicated.

No

Question 56

How much are these monthly incidental rental expenses?

Monthly amount

Question 57

Of this amount, how much are the monthly operating expenses ("cold" incidental expenses not including heating and hot water)?

Monthly amount

Question 58

Of this amount, how much are the monthly incidental expenses for heating and hot water ("warm" incidental expenses)?

Monthly amount

Question 59

Do you have additional housing costs that you do not pay to your landlord/landlady or the property management agency?

This includes costs paid directly to the provider for electricity, gas and water, as well as maintenance costs for work conducted to maintain the value of the property and (smaller) repairs which are not paid by the landlord/landlady.

Please convert any expenses to monthly amounts and then add up the monthly amounts.

Yes, the average monthly amount is

Topic: Assessing the household's financial situation

Question 60

In the last 12 months, has your household been in arrears on the following expenses?

Please mark only one box per type of expense.

Rent for the dwelling/house your household lives in

Yes, once

Yes, more than once

No

Not applicable as the household does not have expenses of this type.

Interest on and/or repayment of mortgages on the dwelling/house your household lives in

Yes, once

Yes, more than once

No

Not applicable as the household does not have expenses of this type.

Interest on and/or repayment of consumer loans, e.g. for a car or furniture (not including current account overdraft)

Yes, once

Yes, more than once

No

Not applicable as the household does not have expenses of this type.

Electricity, heating or water bills

Yes, once

Yes, more than once

No

Not applicable as the household does not have expenses of this type.

Question 61

Are the following things available in your household?

A computer (including laptop, notebook, tablet PC and the like)

Yes

No, because the household cannot afford it.

No, for other reasons

A car (not including company/official cars)

Yes

No, because the household cannot afford it.

No, for other reasons

What can your household afford financially?

Spending at least one week's holiday per year away from home (including with friends/relatives or in the household's own holiday accommodation).

Yes

No

Having a meal with meat, poultry or fish or an equivalent vegetarian meal every second day.

Yes

No

Making unexpected expenses of 1 300 euros or more from the household's own financial resources.

Yes

No

Keeping the dwelling adequately warm.

Yes

No

Question 63

In your household, can you replace furniture (bed, sofa, dresser, cupboard) when worn out or damaged?

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No, because the household cannot afford it.

No, for other reasons

Question 64

Thinking of your household's monthly income, is your household able to make ends meet?

(Voluntary question)

Include the income of all household members.

Please mark only one box.

With great difficulty

With difficulty

With some difficulty

Fairly easily

Easily

Very easily

Question 65

Is your household repaying consumer loans not used to finance owner-occupied housing? (Voluntary question)

Yes

Thinking of the repayment of those loans including interest, which of the following statements applies?

(Voluntary question)

The repayment is a heavy burden.

The repayment is somewhat a burden.

The repayment is not a burden at all.

Topic: Income situation of the household in 2024

Subtopic: Benefits received for children in 2024

Question 67

Did your household receive children's allowance in 2024 for children living in the household?

Yes

No

Not applicable as household members do not have children.

Question 68

For how many children living in the household did your household receive children's allowance?

Number of children

Question 69

Did your household receive children's allowance in 2024 for children not living in the household?

Yes

No

Question 70

For how many children not living in the household did your household receive children's allowance?

Number of children

Did your household receive supplementary children's allowance from the family benefits office of the employment agency in 2024 for children living in the household?

The amount of the supplementary children's allowance depends on the household's income and assets and is capped at 292 euros per month for each child.

Yes

No

Question 72

For which of the children did your household receive supplementary children's allowance?

Please enter for each child for how many months your household received the supplementary children's allowance and what the monthly amount was.

Number of months

Amount per month (full euros)

Question 73

Did your household receive advance maintenance payments in 2024 for children living in the household?

Yes

No

Ouestion 74

For which of the children did your household receive advance maintenance payments?

Please enter for each child for how many months your household received advance maintenance payments.

Number of months

Question 75

Did your household receive foster child allowance in 2024 for foster children living in the household?

Yes

No

Question 76

For which of the children did your household receive foster child allowance?

For each child, please enter the number of months your household received foster child allowance and what the monthly amount was.

Number of months

Amount per month (full euros)(Voluntary question)

Did your household receive long-term care allowance in 2024 for children in need of care (according to the statutory long-term care fund/insurance) who live in the household?

Yes

No

Question 78

For which of the children did your household receive long-term care allowance for children in need of care?

For each child, please enter the number of months your household received long-term care allowance and what the monthly amount was.

Number of months

Amount per month (full euros)

Question 79

Did your household receive benefits for education and participation or financial support for school supplies and school day trips in 2024?

Yes, an annual amount of

No

Subtopic: Income from public benefits in 2024

Question 80

Did your household receive the following public benefits in 2024?

Regarding the benefits received, please enter the number of months and the average monthly amount or the annual amount.

Citizen's benefit (basic income support for job-seekers; formerly: unemployment benefit II, social benefit)

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Accommodation and heating costs (in connection with citizen's benefit)

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Cost-of-living assistance/benefit according to the 5th to 9th chapter of the Social Security Code XII

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Basic security benefits in old age and in cases of reduced earning capacity

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Housing allowance, housing allowance 'Plus' (not accommodation and heating costs under citizen's benefit)

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Subtopic: Other income of the household in 2024

Question 81

Did your household, or a household member, receive the following types of income in 2024?

Regarding the payments received, please enter the number of months and the average monthly amount or the annual amount.

Maintenance payments from people not living in the household in 2024

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Other regular payments from people not living in the household in 2024

Nο

Yes

Number of months

Monthly amount

Annual amount

Monthly amount (full euros)

Annual amount (full euros)

Question 82

Did your household receive income from renting or leasing (proceeds less expenses for maintenance or, perhaps, for interest on loans) in 2024?

No

Yes

Number of months

Monthly amount

Annual amount

Monthly amount (full euros)

Annual amount (full euros)

Question 83

Did your household receive income from savings or investments (capital assets) in 2024?

This includes e.g. interest on saving accounts or building society savings agreements as well as dividends and profits from securities, shares, funds, or from business assets (participations).

Yes

No

Ouestion 84

What was the amount of income from these savings and investments (capital assets)?

Please add up all income amounts (after tax deducted by the credit institutions, if applicable) of the individual household members and allocate the total to one of the classes below.

Less than 250 euros

250 to less than 1 000 euros

1 000 to less than 2 500 euros

2 500 to less than 5 000 euros

5 000 to less than 7 500 euros

7 500 to less than 10 000 euros

10 000 to less than 15 000 euros

15 000 to less than 20 000 euros

20 000 euros or over

In your household, did any children aged 15 or under on 31 December 2024 receive income from own employment in 2024?

Yes

No

Question 86

Which child earned income from own employment?

For each child who received income from employment, please enter the number of months and the amount per month or the annual amount.

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Question 87

Did any children aged 15 or under and living in your household on 31 December 2024 receive orphan's pension/benefit?

Yes

No

Ouestion 88

Which child received orphan's pension or orphan's benefit?

For each child who received orphan's pension/benefit, please enter the number of months and the amount per month or the annual amount.

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Question 89

Did your household produce food for its own use in its own garden or by keeping small animals in 2024?

(Voluntary question)

Yes

No

Question 90

Please estimate the annual amount you would have paid if you had had to buy that food.

(Voluntary question)

Less than 50 euros

50 to less than 100 euros

100 to less than 200 euros

200 to less than 300 euros

300 euros or over

Subtopic: Payments made in 2024

Question 91

Did your household pay real property tax on owner-occupied dwellings, buildings or land in 2024?

This refers to real property for private use.

Yes

No

Question 92

How much real property tax did you pay on your owner-occupied main dwelling?

(Voluntary question)

Annual amount

Not applicable as the household does not own the main dwelling.

Ouestion 93

How much real property tax did you pay on your other real property for own use (e.g. second dwellings, holiday dwellings, plots of forest or meadow)?

(Voluntary question)

Annual amount

Not applicable as the household does not have any other real property.

Question 94

Did your household pay back loans in 2024 (repayment of mortgages and loans under savings and loan contracts) for the dwelling/house your household lives in?

(Voluntary question)

If your household owns more than one property, the owner-occupied main dwelling is meant here.

Yes

No

Question 95

How much did your household pay back on loans (repayment of mortgages and loans under savings and loan contracts) for the dwelling/house your household lives in?

(Voluntary question)

Please refer to your loan repayment plan or statement of account for the amounts. If you are repaying a loan for more than one dwelling in the building, enter only the proportion of the overall loan that refers to the dwelling you live in. Please enter the average monthly amount.

Monthly amount of interest and repayment including: monthly amount of interest

Did your household make one of the following payments in 2024?

If several people of your household made payments to people living outside of your household, please add up all amounts.

Maintenance payments to people not living in the household

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Other regular payments to people not living in the household

No

Yes

Number of months

Monthly amount (full euros)

Annual amount (full euros)

Monthly amount (full euros)

Annual amount (full euros)

Topic: Expenditure on healthcare

Question 97

Please think of the expenditure or co-payments your household incurred in the last 12 months for medical examinations or treatments. Do not include health insurance contributions, expenditure on dental services or the cost of medicines. Which of the following statements applies to medical care?

(Voluntary question)

For the household, the costs of medical care are ...

a heavy burden.

somewhat burdensome.

not a burden at all.

Not applicable as no-one in the household needed medical examinations or treatments.

Please think of the expenditure or co-payments your household incurred in the last 12 months for dental/orthodontic examinations or treatments. Do not include health insurance contributions. Which of the following statements applies to dental/orthodontic care?

(Voluntary question)

For the household, the costs of dental/orthodontic care are ...

a heavy burden.

somewhat burdensome.

not a burden at all.

Not applicable as no-one in the household needed dental/orthodontic examinations or treatments.

Question 99

Please think of the expenditure or co-payments your household incurred in the last 12 months for medicines (prescription-only and non-prescription). Do not include health insurance contributions or expenditure on contraception. Which of the following statements applies to medicines?

(Voluntary question)

For the household, the costs of medicines are ...

a heavy burden.

somewhat burdensome.

not a burden at all.

Not applicable as no-one in the household needed medicines.

Topic: Information and communication technology in the household

Question 100

Does your household have internet access?

Please indicate "Yes" if you or another household member has access to the internet at home, e.g. via a desktop computer, laptop/tablet or smartphone. The household then generally has a contract with an internet provider (e.g. Telekom, Vodafone, o2, 1&1, Deutsche Glasfaser), and equipment to connect to the internet is available in the household (e.g. router, Fritzbox, modem). Other methods of accessing the internet are also included (e.g mobile broadband dongle/SIM card) if this allows the use of the internet at home.

Yes

No

I don't know.

Topic: Childcare

Question 101

Is there at least one child in your household who is aged 14 or under?

Yes

No

Question 102

For each child aged 14 or under, please indicate the type of care in the 12 months before the reference week.

Please mark all relevant boxes.

Day care centre (kindergarten, crèche)

Professional child minder

Au-pair, babysitter

Preschool institution (pre-primary education)

Care services for pupils before and/or after school (offered by school or other facility)

Relatives, friends, neighbours

Not applicable as the child is cared for only by his/her parents.

Question 103

For each child aged 14 or under, please indicate the type of care in the 4 weeks before the reference week.

Please mark all relevant boxes.

Day care centre (kindergarten, crèche)

Professional child minder

Au-pair, babysitter

Preschool institution (pre-primary education)

Care services for pupils before and/or after school (offered by school or other facility)

Relatives, friends, neighbours

Not applicable as the child is cared for only by his/her parents.

Question 104

Is this dwelling the main residence of at least one person in the household who was 16 years or older on 31 December 2024?

Yes

No

Question 105

Is there at least one child in your household who is aged 12 or under?

Yes

During a usual week, how many hours is the child cared for?

(Voluntary question)

Please enter the number of full hours for each child aged 12 or under and for each applicable type of care.

Day care centre (kindergarten, crèche)

Professional child minder

Au-pair, babysitter

Preschool institution (pre-primary education)

Care services for pupils before and/or after school (offered by school or other facility)

Relatives, friends, neighbours

Not applicable as the child is cared for only by his/her parents.

Question 107

During a usual week, how many hours in total is the child cared for (sum total of hours for the types of care listed in question 106)?

Please enter the number of full hours for each child aged 12 or under.

Number of hours per week

Not applicable as the child is cared for only by his/her parents.

Topic: Mobility and the environment (households)

Question 108

Does your household have access to a car for private use whenever needed?

(Voluntary question)

Please also consider company cars or other cars that are not owned by the household but are used for private purposes regularly.

Yes

No

Question 109

How many cars does your household have access to for private use (including company cars and leased cars)?

(Voluntary question)

Number of cars in the household

What type of fuel/power unit is used to power the newest car that your household uses for private purposes? Newest car means the car registered the most recently.

(Voluntary question)

If the household only uses one car, indicate the type of fuel/power unit for that car.

Diesel

Petrol

Hybrid (electric motor and internal combustion engine)

Electric car (electric motor)

Other (e.g. natural gas, autogas or hydrogen gas)

I don't know.

Question 111

When was the newest car your household uses first registered? Newest car means the car registered the most recently.

(Voluntary question)

If the household only uses one car, indicate the year that car was first registered.

Year of first registration

I don't know.

Question 112

When was the oldest car your household uses first registered? Oldest car means the car that is registered the longest.

(Voluntary question)

Year of first registration

I don't know.

Not applicable as the household only uses one car.

Question 114

Do you separate plastic bottles from other household waste (e.g. by using the "yellow bag/bin" or returning deposit bottles)?

(Voluntary question)

Always or most of the time

Sometimes

Rarely or never

Topic: Survey participation

Question 115

Have questions 1 to 114 been answered by a household member?

(Voluntary question)

Yes, person number (see flap)

No

Question 116

How many minutes did it take to answer this part of the questionnaire?

(Voluntary question)

Number of minutes

Topic: Citizenship and duration of residence

Question 117

Were you born in Germany?

The place of birth is Germany also in the following cases:

- the place of birth was part of Germany's national territory at the time of birth, but today it is not (e.g. Breslau before 1945).
- the place of birth is part of Germany's national territory today, but it was not at the time of birth (e.g. the person concerned was born in Dresden between 1949 and 1990, which was GDR territory at the time, or in Saarland between 1947 and 1956).

Yes

No

Question 118

Were you born in the Federal Republic of Germany (today's territory)?

"Today's territory" refers to the national borders of the Federal Republic of Germany as of 3 October 1990.

Yes

No

Question 119

In which country (today's borders) were you born?

When did you (first) arrive in the Federal Republic of Germany (today's territory)?

Year

Question 121

What was your (main) reason for moving to the Federal Republic of Germany (today's territory)?

If there are several reasons, please mark the main one.

Employment: job found before moving to Germany

Employment: no job found before moving to Germany

Academic studies or other education, advanced training

Moved to Germany with a family member or followed a family member (family reunification)

Marriage/partnership with a person living in Germany (family formation)

Flight, persecution, expulsion, asylum

Free movement within the EU: wished to settle in Germany

Retirement

Other main reason

Question 122

What language/languages do you speak at home?

I only speak German at home.

I speak German and at least one other language at home.

I do not speak German at home but another language/other languages.

What language do you mainly speak at home?

Albanian

Arabic

Bosnian

Bulgarian

Chinese

Danish

German

English

French

richen

Greek

Hindi

Italian

Croatian

Kurdish

Macedonian

Dutch

Pashto

Persian

Polish

Portuguese

Romanian

Russian

Serbian

Spanish

Turkish

Ukrainian

Hungarian

Urdu

Vietnamese

Another European language

Another African language

Another Asian language

Another language

Question 124

Have you ever interrupted your stay in the Federal Republic of Germany (today's territory) and lived abroad for at least one year?

Yes

In what year did you return to the Federal Republic of Germany (today's territory) after you last stayed abroad for at least one year?

Year

Question 126

Do you have German citizenship?

Yes, German citizenship only

Yes, German citizenship and citizenship of at least one foreign country

No

Question 127

Of which foreign country do you have citizenship?

If you cannot furnish proof of citizenship, please enter "uncertain". If you do not have citizenship of any country, please enter "stateless".

Question 128

Do you have citizenship of another foreign country?

Yes

No

Question 129

Of which second foreign country do you have citizenship?

Question 130

Of which other country do you have citizenship?

Question 131

How did you obtain German citizenship?

By birth

As a non-naturalised (ethnic) German repatriate

As a naturalised (ethnic) German repatriate

By naturalisation (no ethnic German repatriate)

By adoption by German parent(s)

Question 132

When were you naturalised?

Year

Which citizenship did you have before your naturalisation?

You may also enter citizenship of the following former countries: Yugoslavia, Serbia and Montenegro, Soviet Union, Czechoslovakia

If you were stateless before your naturalisation, please enter "stateless".

Question 134

Does your mother live in this household?

This includes stepmothers, adoptive and foster mothers.

Yes

No

Question 135

Has your mother moved to Germany (today's territory)?

Yes, in (year)

Yes, but I do not know the year of arrival.

No

Question 136

When did your mother move to Germany (today's territory)?

Before 1950

1950 or later

Question 137

Is/was your mother a German citizen?

Yes, by birth

Yes, as a non-naturalised (ethnic) German repatriate

Yes, as a naturalised (ethnic) German repatriate

Yes, by naturalisation (no ethnic German repatriate)

Yes, by adoption by German parent(s)

Yes, but I do not know how it was obtained.

No

Question 138

Was your mother born in Germany (today's territory)?

Yes

No

Question 139

In which country (today's borders) was your mother born?

Does your father live in this household?

This includes stepfathers, adoptive and foster fathers.

Yes

No

Question 141

Has your father moved to Germany (today's territory)?

Yes, in (year)

Yes, but I do not know the year of arrival.

No

Question 142

When did your father move to Germany (today's territory)?

Before 1950

1950 or later

Ouestion 143

Is/was your father a German citizen?

Yes, by birth

Yes, as a non-naturalised (ethnic) German repatriate

Yes, as a naturalised (ethnic) German repatriate

Yes, by naturalisation (no ethnic German repatriate)

Yes, by adoption by German parent(s)

Yes, but I do not know how it was obtained.

No

Question 144

Was your father born in Germany (today's territory)?

Yes

No

Question 145

In which country (today's borders) was your father born?

Question 146

Does your mother live in this household?

This includes stepmothers, adoptive and foster mothers.

Yes

Was your mother born in Germany (today's territory)?

Yes

No

Question 148

In which country (today's borders) was your mother born?

Question 149

Does your father live in this household?

This includes stepfathers, adoptive and foster fathers.

Yes

No

Question 150

Was your father born in Germany (today's territory)?

Yes

No

Question 151

In which country (today's borders) was your father born?

Topic: School or university attendance

Question 152

Were you a pupil, apprentice, student in the 12 months before the reference week?

Please mark "Yes" even if this applied only to part of the period.

Yes

No

Question 153

Were you a pupil, apprentice, student in the 4 weeks before the reference week?

Yes

No, because I switched to another school, higher education institution or apprenticeship, because of university vacation, school holidays, practical training phase in an establishment, studies at a higher education institution or school abroad, illness, maternity leave

No, for other reasons

Is this dwelling your main residence?

Yes

No

Question 155

Were you aged 16 years or over on 31 December 2024?

Yes

No

Question 156

Which qualification do you wish to obtain by pursuing this education/training?

Secondary general school certificate

Intermediate school certificate

Entrance qualification for universities of applied sciences

University entrance qualification (general or subject-restricted)

Apprenticeship or comparable full-time vocational school certificate

Master craftsman/craftswoman certificate

Trade and technical school certificate or equivalent

Higher education degree

Other qualification

Which school/higher education institution did you last attend?

Schools of general education

Primary school

Orientation stage in grades 5/6 (e.g. at primary or secondary schools, diagnostic stage)

Special school, special needs school, special needs assistance

School offering several courses of education

Secondary general school, evening secondary general school

Intermediate school, evening intermediate school

Comprehensive school

Waldorf school

Grammar school

Vocational grammar school, also grammar school specialising in economics or technical subjects

Evening grammar school, adult education college

Vocational schools offering a general school certificate

Vocational school offering an intermediate school certificate (e.g. full-time vocational school)

Vocational school offering an entrance qualification for higher education institutions:

Specialised upper secondary school

Full-time vocational school

Two-year full-time vocational school

Vocational schools

Pre-vocational training year

Basic vocational training year

Vocational school (dual system)

Full-time vocational school providing a vocational qualification

Training centre/school for health-care service occupations and social occupations:

one year (e.g. geriatric care assistant)

two years (e.g. masseur/masseuse, pharmaceutical laboratory assistant)

three years (e.g. physiotherapy, medical laboratory assistant, geriatric care)

Training centre/school for educators

Master craftsman/craftswoman training programme at trade and technical schools

Trade and technical school e.g. for technicians, business economists

Specialised academy (in Bayern only)

Higher education institutions

Vocational academy

College of public administration

University of applied sciences, Cooperative State University (in Baden-Württemberg, Schleswig-Holstein and Thüringen)

University (also college of art and music, college of education, college of theology)

Doctoral studies

Which are the highest grades you attended at a school of general education?

Grades 1 to 4 Grades 5 to 9/10

Upper secondary grades in grammar school

Question 159

What is the title of your master craftsman/craftswoman specialisation?

This refers to master craftsman/craftswoman training programmes at trade and technical schools, e.g. master carpenter, master hairdresser, master electrician, master home economist, master plumber and the like.

Question 160

What course of study did you take?

Bachelor's

Master's

Diplom degree or comparable course of study

Question 161

Are you 15 years or older?

Yes

No

Topic: Employment situation in the reference week

Question 162

Did you do at least 1 hour of paid work in the reference week? Please take into account also self-employment and minor jobs.

Yes

No

Question 163

Did you work for at least 1 hour in the reference week as an unpaid family worker in a family business?

Yes

Do you normally have work or a job from which you were absent in the reference week? Possible reasons are e.g. holidays, illness or parental leave.

Yes

No

Question 165

Did you do any casual or small jobs for payment in the reference week, such as those listed below? This refers to work that you did not do for your own family.

It includes working, for example, as/in ...

- waiter/waitress, service employee or temporary helper in a bar, restaurant or hotel
- household helper or cleaner
- delivery services driver for restaurants, online shops; or as courier
- babysitter
- carer of children or of people in need of care
- deliverer of advertising leaflets or free newspapers
- hostess/gentleman host
- private tutor
- renovation or construction helper (e.g. painting, wallpapering, plastering, installing electrics, plumbing)
- gardening (mowing the lawn, cutting hedges or trees, etc.)
- harvesting
- preparing analyses or reports, scientific work
- academic assistant
- bookkeeping
- translator
- coach in a sports club
- temporary security worker
- freelancer on online platforms
- artist or performer
- blogger, influencer, or creating other online content for pay
- pet carer
- preparing events
- other activities

Yes

Why did you not work in the reference week?

If there are several reasons, please mark the main one.

Illness, accident (including spa treatment, rehabilitation)

Holidays, special leave

Compensation leave (within the framework of a working time account or an annualised hours contract)

Maternity leave

Partial retirement

Vocational and continuing training

Parental leave

Released from work under the Caregiver Leave Act

Off-season

Strike, lockout

Bad weather

Short-time work for technical or economic reasons

General and continuing education, school attendance

Personal or family responsibilities

Other reasons

I have already found a job but did not yet work in that job in the reference week.

Question 167

Are you still receiving continued pay, public or social benefits as full or partial wage/salary replacement?

Yes

No

Not applicable because self-employed, freelancer

Ouestion 168

Indicate the total period of your absence from work.

3 months or less

More than 3 months

Question 169

Do you do any work in that job during the off-season?

Yes

Topic: Job during the reference week

Ouestion 170

What was your status in employment in the reference week?

If you have more than one job, your answer should only refer to the job in which you work the most hours (main job). In this context, it is irrelevant whether you are actually working in your main job or whether you are absent, for instance, because of parental leave, illness or holidays.

Self-employed person, freelancer without employees

with employees

Unpaid family worker in a family business

Public official (not including candidates), judge

Salary earner, wage earner (not including apprentices)

Apprentice/trainee receiving remuneration

Candidate public official

Intern, trainee (including paid practical training or internship)

Temporary or professional soldier

In voluntary military service

In the Federal Volunteer Service (also social, ecological or cultural year)

Other employee with a small-scale job

Question 171

With whom did you conclude/enter into your apprenticeship contract?

This refers to remunerated apprenticeships/traineeships.

With an establishment (company, shop, office, hospital, public authority)

With an inter-company or external institution as vocational training provider, e.g. a vocational training centre for disabled young people (Berufsbildungswerk), educational centre (Bildungszentrum)

Question 172

Are you in marginal employment?

If you have more than one job, your answer should only refer to the job in which you work the most hours (main job). In this context, it is irrelevant whether you are actually working in your main job or whether you are absent, for instance, because of parental leave, illness or holidays.

Yes, a 538-euros job, mini-job (average maximum earnings of 538 euros per month)

Yes, short-term employment (a maximum of 3 months or 70 days worked per year)

Yes, a one-euro job (job opportunity for people receiving citizen's benefit)

How often do you work in your job?

Regularly Irregularly, occasionally On a seasonal basis

Question 174

Please provide some keywords to describe your current job.

(Voluntary question)

For example

- selling clothing
- teaching children at primary school
- advising and informing customers on travel offers
- designing or planning buildings and other structures
- assembling and testing electronic circuits
- mixing concrete, mortar and plaster
- attending to and caring for patients (before, during and after surgeries)

Question 175

What is the title of your current job?

For example:

- fashion shop assistant
- primary school teacher
- travel agent
- construction engineer
- electronic equipment mechanic
- unskilled construction labourer
- nurse

Question 176

Do you mainly perform executive or supervisory duties in your job?

Yes, executive duties (including the authority to take staff, budget and strategy decisions)

Yes, supervisory duties (guiding and supervising staff, distributing work and checking the outcome)

Enter the branch of activity of the establishment (location) you currently work in.

If the establishment has several locations, please enter the main activity of the location, not of the whole enterprise. If you are a temporary employee, please enter the relevant branch of activity you currently work in. Please state the branch of activity as accurately as possible, for example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

Question 178

Please fold out the flap at the side of page 2 and enter the name and address of the establishment.

The name and address of the establishment will only be used to identify its branch of activity and will not be stored.

Question 179

Are you employed in the public service?

The public service comprises the federal, Land and municipal authorities, publicly maintained schools, the employment agency, the social security institutions, the police and the Federal Armed Forces. If you work in a privatised successor company of Deutsche Post/Bundesbahn or are employed by a church, please indicate "No".

Yes

No

Question 180

How many people work in the establishment (location) you currently work in?

If you are self-employed and have several establishments/locations, your answer regarding the size of the establishment should refer to the establishment with the highest number of employees.

Up to 10 people

11 to 19 people

20 to 49 people

50 to 249 people

250 to 499 people

500 people or more

Question 181

Please enter the exact number of people working in the establishment:

Number of people

Topic: Change of job or occupation

Question 182

Did you change your job/line of business in the reference week or the preceding 12 months?

If you are self-employed or a freelancer and you changed your line of business, please mark "Yes". If you are an employee and you started a new job with your current or a new employer, please mark "Yes". A change of job includes a switch from dependent employment to self-employment or freelance work and vice versa.

Yes

No

Question 183

Is this dwelling your main residence?

Yes

No

Question 184

Why did you change your job/line of business?

If there are several reasons, please mark the main one.

Start of or search for a better job

Other reasons

Ouestion 185

Did you change your occupation in the reference week or the preceding 12 months?

This includes a change of occupation without retraining.

Yes

No

Topic: Scope and scale of current job

Question 186

Do you currently have a full-time or part-time job?

If you have more than one job, your answer should only refer to the job in which you work the most hours (main job). If you are in partial retirement or on parental leave please mark the category relating to the time before you entered partial retirement or went on parental leave

Full-time

Part-time

Why do you work part-time?

If there are several reasons, please mark the main one.

Could not find full-time work

School education, studies, other education or advanced training

Own illness, consequences of an accident

Permanently reduced earning capacity, permanent disability

Have to look after children

Have to look after people with disabilities

Have to look after people in need of care

Other family reasons

Other personal reasons

I want to work part-time.

Other main reason

Question 188

Why do you personally look after children, people with disabilities or people in need of care?

If there are several reasons, please mark the main one.

There is no adequate care available in the vicinity.

There is no adequate care available at the relevant times of the day.

Adequate care is too expensive.

I want to do it myself.

Other essential reasons

Question 189

Are you self-employed/a freelancer or an unpaid family worker?

Yes

No

Question 190

How many hours per week do you usually work?

If your working hours vary greatly, please estimate the average hours you work per week based on the last 4 to 12 weeks.

Please round to the nearest half hour (e.g. 38.5).

Number of hours

Question 191

Does your job involve temporary agency work?

Yes

Do you have a fixed-term working contract?

An apprenticeship or training contract is considered as a fixed-term contract.

Yes, fixed-term contract

No, open-ended contract

Question 193

Is this dwelling your main residence?

Yes

No

Question 194

Were you aged 16 years or over on 31 December 2024?

Yes

No

Question 195

Do you have a written employment contract or a verbal agreement?

(Voluntary question)

Written employment contract

Verbal employment agreement

Question 196

Do you usually work as many hours per week as contractually agreed?

Yes

No

Question 197

How many hours a week do you usually work, including regular extra hours and stand-by duty?

If your working hours vary greatly, please estimate the average hours you work per week based on the last 4 to 12 weeks.

Please round to the nearest half hour (e.g. 40.5).

Number of hours

Question 198

In the reference week, were there any days when you did not work because of vacation or public holidays?

Yes

How many days in total did you not work in the reference week because of vacation or public holidays?

Please include half days and count them as 0.5.

Number of days

Question 200

In the reference week, were there (other) days when you did not work because of illness, injury or a temporary disability?

Yes

No

Question 201

How many days in total did you not work in the reference week because of illness?

Please include half days and count them as 0.5.

Number of days

Question 202

In the reference week, were there (other) days when you did not work because of other reasons?

Yes

No

Question 203

How many days in total did you not work in the reference week for other reasons?

Please include half days and count them as 0.5.

Number of days

Question 204

How many hours did you actually work in the reference week?

The number of hours actually worked may differ from the hours usually worked because of overtime, holidays, extra shifts, public holidays, illness and the like. The number of hours actually worked includes continuing and advanced training, stand-by duty, mobile work hours and work done at home provided that it is a normal part of your job.

If you did not work in the reference week, please enter "0". Please round to the nearest half hour (e.g. 28.5).

Number of hours

Topic: Second or additional jobs

Question 205

Did you have more than one paid job in the reference week?

This includes working as a self-employed person or unpaid family worker.

Yes, I had 2 jobs.

Yes, I had more than 2 jobs.

No

Question 206

Are you in marginal employment in your additional job?

If you have more than one additional job, please answer the questions below for the additional job in which you work the most hours.

Yes, a 538-euros job, mini-job (average maximum earnings of 538 euros per month)

Yes, short-term employment (a maximum of 3 months or 70 days worked per year)

Yes, a one-euro job (job opportunity for people receiving citizen's benefit)

No

Question 207

How often do you work in your additional job?

Regularly
Irregularly, occasionally
On a seasonal basis

Question 208

What is your status in your additional job?

Self-employed person, freelancer
without employees
with employees
Unpaid family worker in a family business
Public official, judge
Salary earner, wage earner (not including apprentices)

Please provide some keywords to describe your additional job.

(Voluntary question)

For example

- selling clothing
- teaching children at primary school
- advising and informing customers on travel offers
- designing or planning buildings and other structures
- assembling and testing electronic circuits
- mixing concrete, mortar and plaster
- attending to and caring for patients (before, during and after surgeries)

Question 210

What is the title of your additional job?

For example:

- fashion shop assistant
- primary school teacher
- travel agent
- construction engineer
- electronic equipment mechanic
- unskilled construction labourer
- nurse

Question 211

Do you mainly perform executive or supervisory duties in your additional job?

Yes, executive duties (including the authority to take staff, budget and strategy decisions)

Yes, supervisory duties (guiding and supervising staff, distributing work and checking the outcome)

No

Question 212

Enter the branch of activity of the establishment (location) in which you work in your additional job.

If the establishment has several locations, please enter the main activity of the location, not of the whole enterprise. If you are a temporary employee, please enter the branch of activity in which you work in your additional job. Please state the branch of activity as accurately as possible, for example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

How many hours a week do you usually work in your additional job, including regular extra hours and stand-by duty?

If your working hours vary greatly, please estimate the average hours you work per week based on the last 4 to 12 weeks.

Please round to the nearest half hour (e.g. 10.5).

Number of hours

Question 214

How many hours did you actually work in your additional job in the reference week?

If you did not work in the reference week, please enter "0". Please round to the nearest half hour (e.g. 9.5).

Number of hours

Topic: Desired number of working hours

Question 215

Would you like to retain your normal weekly working hours or to change them, subject to a corresponding adjustment in earnings?

The weekly working hours include the hours worked in the main job as well as in second and additional jobs.

Retain

Increase

Reduce

Ouestion 216

How would you like to increase your working hours?

Exclusively by working more hours in the current job(s)

Exclusively by taking up one or more additional jobs

Exclusively by moving to a job with more working hours

Without committing to one of the above options

By combining some of the above options

Question 217

Thinking of the 2 weeks following the reference week:Would you be able to start working more hours in these 2 weeks?

Yes

How many hours a week would you like to work?

The weekly working hours include the hours worked in the main job as well as in second and additional jobs.

Please round to the nearest half hour (e.g. 32.5).

Number of hours

Topic: Search for work by persons in employment/persons with a second job

Question 219

Did you look for different or additional work in the reference week or the preceding 3 weeks?

Looking for work includes any search for paid work, including second or mini-jobs, self-employed or freelance activities, or small-scale activities. Forms of search are, for instance, looking through job offers in newspapers or on the internet, searching for job vacancies on notice boards, asking acquaintances and relatives.

Yes

No

Topic: Last job or absence from work

Question 220

Have you ever done paid work as an employee or self-employed person?

Retired people and former apprentices please mark "Yes" if they worked for a total of more than 3 months. Former unpaid family workers please mark "Yes".

Yes

No

Question 221

Did you work for more than 3 months in that job?

If you did paid work several times for a shorter period (e.g. seasonal work or as a student assistant), please mark "Yes" if you worked for a total of more than 3 months.

Yes

Why did you leave your last paid job or are absent from it?

If there are several reasons, please mark the main one.

Reasons related to the labour market

Dismissal (including closure of establishment) End of a fixed-term working contract

Sale or closure of own enterprise

Family reasons

Have to look after children

Have to look after people with disabilities

Have to look after people in need of care

Other family reasons

Personal reasons

Own resignation

School or vocational education, studies

Own illness, consequences of an accident

Permanently reduced earning capacity, permanent disability

Retirement

Other personal reasons

Other reasons

Other main reason

Question 223

When did you leave your last paid job/since when have you been absent from it?

Month

Year

Question 224

What was your status in your last job/the job from which you are absent?

Self-employed person, freelancer

without employees

with employees

Unpaid family worker in a family business

Public official (not including candidates), judge

Salary earner, wage earner (not including apprentices)

Apprentice/trainee receiving remuneration

Candidate public official

Intern, trainee (including paid practical training or internship)

Temporary or professional soldier

Person doing compulsory military/civilian service

In voluntary military service

In the Federal Volunteer Service (also social, ecological or cultural year)

With whom did you conclude/enter into your apprenticeship contract?

This refers to remunerated apprenticeships/traineeships.

With an establishment (company, shop, office, hospital, public authority)

With an inter-company or external institution as vocational training provider, e.g. a vocational training centre for disabled young people (Berufsbildungswerk), educational centre (Bildungszentrum)

Question 226

Please provide some keywords to describe your last job/the job from which you are absent.

(Voluntary question)

For example

- selling clothing
- teaching children at primary school
- advising and informing customers on travel offers
- designing or planning buildings and other structures
- assembling and testing electronic circuits
- mixing concrete, mortar and plaster
- attending to and caring for patients (before, during and after surgeries)

Question 227

What was/is the title of your last job/the job from which you are absent?

For example

- fashion shop assistant
- primary school teacher
- travel agent
- construction engineer
- electronic equipment mechanic
- unskilled construction labourer
- nurse

Question 228

Did you mainly perform executive or supervisory duties in your last job/the job from which you are absent?

Yes, executive duties (including the authority to take staff, budget and strategy decisions)

Yes, supervisory duties (guiding and supervising staff, distributing work and checking the outcome)

Enter the branch of activity of the establishment (location) you last worked in/from which you are absent.

If the establishment has several locations, please enter the main activity of the location, not of the whole enterprise. If you were a temporary employee, please enter the branch of activity of the establishment (location) you last worked in or the branch of activity of the job from which you are absent. Please state the branch of activity as accurately as possible, for example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

Question 230

In your last job/the job from which you are absent: Were you employed in the public service?

The public service comprises the federal, Land and municipal authorities, publicly maintained schools, the employment agency, the social security institutions, the police and the Federal Armed Forces. If you worked in a privatised successor company of Deutsche Post/Bundesbahn most recently or were employed by a church, please indicate "No".

Yes

No

Question 231

What type of employment contract did you have in your last main job?

Open-ended work contract Fixed-term work contract

Topic: Search for work

Question 232

Are you 90 years or older?

Yes

No

Question 233

Did you make any effort to find (new) work in the reference week or the preceding 3 weeks? This includes any search for a job with only a few hours or activities to start a business.

Yes

What did you do in the reference week or the preceding 3 weeks to find new work? Please mark all relevant boxes.

Contacted the employment agency (job centre) or other employment authority

Contacted private employment organisations

Placed job wanted advertisements

Responded to job offers

Sent off unsolicited applications

Asked friends, relatives, acquaintances

Looked through job offers

Took tests, interviews, exams

Placed or updated online CVs

Searched for premises, offices, equipment for self-employment or a freelance job

Applied for licences, concessions or financial resources for self-employment or a freelance job

Took other action for self-employment or a freelance job

Took other action

Question 235

Did you find a job in the reference week?

Yes, I found a job in the reference week and have started it.

Yes, I found a job in the reference week but have not started it yet.

No, I did not look for or find a job in the reference week.

Question 236

When will you start your new job?

Within the 3 months after the reference week

Later, that is, more than 3 months after the reference week

Question 237

If you are not looking for a job, would you nevertheless like to work?

This also refers to jobs with only a few hours.

Yes

Why did you not look for a job in the reference week and the preceding 3 weeks?

If there are several reasons, please mark the main one.

No suitable job available

I am awaiting re-employment (following temporary lay-off).

Own illness, consequences of an accident

Permanently reduced earning capacity, permanent disability

Have to look after children

Have to look after people with disabilities

Have to look after people in need of care

Other family responsibilities

Other personal responsibilities

School or vocational education, studies

Retirement

Other main reason

Question 239

Why do you personally look after children, people with disabilities or people in need of care?

If there are several reasons, please mark the main one.

There is no adequate care available in the vicinity.

There is no adequate care available at the relevant times of the day.

Adequate care is too expensive.

I want to do it myself.

Other essential reasons

Question 240

If a paid job had been available in the reference week, could you have started it within the following 2 weeks?

Yes

No

Question 241

Why would you not be able to start a new job within the following 2 weeks?

If there are several reasons, please mark the main one.

School or vocational education, studies

Own illness, consequences of an accident

Permanently reduced earning capacity, permanent disability

Have to look after children

Have to look after people with disabilities

Have to look after people in need of care

Other family responsibilities

Other personal responsibilities

Retirement

Other main reason

Why do you personally look after children, people with disabilities or people in need of care?

If there are several reasons, please mark the main one.

There is no adequate care available in the vicinity.

There is no adequate care available at the relevant times of the day.

Adequate care is too expensive.

I want to do it myself.

Other essential reasons

Question 243

Why do you not want to, or why are you not able to work?

If there are several reasons, please mark the main one.

School or vocational education, studies

Own illness, consequences of an accident

Permanently reduced earning capacity, permanent disability

Have to look after children

Have to look after people with disabilities

Have to look after people in need of care

Other family responsibilities

Other personal responsibilities

Retirement

Other main reason

Question 244

Why do you personally look after children, people with disabilities or people in need of care? If there are several reasons, please mark the main one.

There is no adequate care available in the vicinity.

There is no adequate care available at the relevant times of the day.

Adequate care is too expensive.

I want to do it myself.

Other essential reasons

Ouestion 245

How long have you looked or did you look for (other) work?

Less than 1 month

1 to less than 3 months

3 to less than 6 months

6 to less than 12 months

1 to less than 1 ½ years

1 ½ to less than 2 years

2 to less than 4 years

4 years or more

If a paid job had been available in the reference week, could you have started it within the following 2 weeks?

Yes

No

Question 247

Why would you not be able to start a new job within the following 2 weeks?

If there are several reasons, please mark the main one.

School or vocational education, studies

Own illness, consequences of an accident

Permanently reduced earning capacity, permanent disability

Have to look after children

Have to look after people with disabilities

Have to look after people in need of care

Other family responsibilities

Other personal responsibilities

Retirement

Other main reason

Question 248

Why do you personally look after children, people with disabilities or people in need of care?

If there are several reasons, please mark the main one.

There is no adequate care available in the vicinity.

There is no adequate care available at the relevant times of the day.

Adequate care is too expensive.

I want to do it myself.

Other essential reasons

Topic: Self-assessment of life situation in the reference week and other information on employment

Question 249

Regarding your situation in the reference week: which category best describes it?

Salary earner, wage earner, public official (including temporary or professional soldiers, apprentices) and currently:

on parental leave

in partial retirement

fully or partly released from work under the Caregiver Leave Act

partly released from work under the Family Caregiver Leave Act

Salary earner, wage earner, public official (including temporary or professional soldiers, apprentices) not on parental leave or in partial retirement and not released from work Self-employed person, freelancer:

without employees

with employees

Unpaid family worker in a family business

In the Federal Volunteer Service (also social, ecological or cultural year), in voluntary military service

Pupil, student

Retired or in early retirement

Unemployed

Housewife/househusband, looking after children or people in need of care

Permanently unfit for work

Other

Question 250

Is this dwelling your main residence?

Yes

No

Question 251

Were you aged 16 years or over on 31 December 2024?

Yes

In what year did you enter employment for the first time?

This also includes apprenticeships/company-based vocational training and training at a vocational academy/cooperative state university. Please mark "Not applicable" even if so far you have done only a (second) job as a pupil or student.

Year of entering employment Not applicable

Question 253

How many years have you been in employment since then?

Only count the years in which you were actually in employment. This also includes apprenticeships/company-based vocational training and training at a vocational academy/cooperative state university.

Please round up to full years.

Number of years

Question 254

Do you do at least 1 hour of paid work (second job) in a usual week, although you are mainly not in employment (see question 249, answers 10-15)?

Yes

No

Question 255

What was your status in your last main job?

Self-employed person

freelancer without employees

freelancer with employees

Unpaid family worker in a family business

Public official (not including candidates), judge

Salary earner, wage earner (not including apprentices)

Apprentice/trainee receiving remuneration

Candidate public official

Intern, trainee (including paid practical training or internship)

Temporary or professional soldier

Person doing compulsory military/civilian service

In voluntary military service

In the Federal Volunteer Service (also social, ecological or cultural year)

Not applicable

Please provide some keywords to describe your last main job.

(Voluntary question)

For example:

- selling clothing
- teaching children at primary school
- advising and informing customers on travel offers
- designing or planning buildings and other structures
- assembling and testing electronic circuits
- mixing concrete, mortar and plaster
- attending to and caring for patients (before, during and after surgeries)

Question 257

What was the title of your last main job?

For example:

- fashion shop assistant
- primary school teacher
- travel agent
- construction engineer
- electronic equipment mechanic
- unskilled construction labourer
- nurse

Question 258

Enter the branch of activity of the establishment (location) in which you last worked in your main job.

If the establishment has several locations, please enter the main activity of the location, not of the whole enterprise. If you were a temporary employee, please enter the branch of activity of your last main job. Please state the branch of activity as accurately as possible, for example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

Ouestion 259

Please think of the last 5 years. What was the duration of your last unemployment?

(Voluntary question)

No unemployment in the last 5 years

Duration of the last unemployment in months

Topic: Current income situation

Question 260

Which are your main sources of livelihood?

Main sources of livelihood: code from List 260

Liste 260

Own employment(Zi	iffer 1)
Unemployment benefit I (Zi	iffer 2)
Citizen's benefit (Zi	iffer 3)
Public assistance, e.g. basic security in old age and in cases of reduced earning cap assistance for nursing care, continuous subsistence payments (Z	
Pension based on my own entitlements (Zi	iffer 5)
Surviving dependant's pension (Ziff	fer 15)
Own property, savings, interest, renting, leasing, life interest retained for older peolife assurance, specific pensions fund (Versorgungswerk) (Z	
Parental allowance (Zi	iffer 7)
Income of the parents (Zi	iffer 8)
Income of the partner, spouse or other relatives (Zif	fer 14)
Maintenance payments or other regular payments received from other private households(Zi	iffer 9)
Training assistance (BAföG), scholarship/grant (Zif	fer 10)
Benefits for asylum seekers (Ziff	fer 11)
Benefits from own long-term care insurance (long-term care allowance) (Zif	fer 12)
Other financial support, e.g. early retirement payments, foster child allowance, sich pay, loan in accordance with the Caregiver Leave Act or the Family Caregiver Leave	Act

What was your personal net income (total of all income sources) in the month before the reference week?

The personal net income is calculated as gross earnings less taxes and less contributions to health, long-term care and unemployment insurance as well as to statutory pension insurance. This includes:

- earnings from main and second job(s), extra payments (e.g. Christmas bonus, severance pay, bonus payments)
- pensions
- unemployment benefit I, citizen's benefit
- basic security in old age and in cases of reduced earning capacity, assistance for nursing care, continuous subsistence payments and other public assistance benefits
- heating and housing benefits, housing allowance, children's allowance, long-term care allowance, parental allowance, training assistance (BAföG), child bonus and other public payments
- maintenance payments or other regular payments received from other private households
- further income and receipts (e.g. entrepreneurial income, income from renting and leasing, interest, dividends)

Personal net income: code from List 261 I had no income.

Liste 261

Less than 250 euros	. (Ziffer 1)
250 to less than 500 euros	,
500 to less than 750 euros	
750 to less than 1 000 euros	
	,
1 000 to less than 1 250 euros	
1 250 to less than 1 500 euros	. (Ziffer 6)
1 500 to less than 1 750 euros	. (Ziffer 7)
1 750 to less than 2 000 euros	. (Ziffer 8)
2 000 to less than 2 250 euros	. (Ziffer 9)
2 250 to less than 2 500 euros	(Ziffer 10)
2 500 to less than 2 750 euros	(Ziffer 11)
2 750 to less than 3 000 euros	(Ziffer 12)
3 000 to less than 3 250 euros	(Ziffer 13)
3 250 to less than 3 500 euros	(Ziffer 14)
3 500 to less than 4 000 euros	(Ziffer 15)
4 000 to less than 4 500 euros	(Ziffer 16)
4 500 to less than 5 000 euros	(Ziffer 17)
5 000 to less than 6 000 euros	(Ziffer 18)
6 000 to less than 7 000 euros	(Ziffer 19)
7 000 to less than 8 000 euros	(Ziffer 20)
8 000 to less than 10 000 euros	(Ziffer 21)
10 000 to less than 15 000 euros	(Ziffer 22)
15 000 to less than 25 000 euros	(Ziffer 23)
25 000 euros or over	(Ziffer 24)

What was the total net income of your household in the month before the reference week?

The net income of the household is the sum of the net incomes of all people in the household.

Net household income

Code from List 261

Topic: Development of the household income

Question 263

Is this dwelling the main residence of at least one person in the household who was 16 years or older on 31 December 2024?

Yes

No

Question 264

How has net household income changed compared with the previous year?

(Voluntary question)

Please take into account the income of all household members.

The net household income has increased.

The net household income is more or less unchanged.

The net household income has decreased.

Question 265

What is the main reason for the increase in net household income?

(Voluntary question)

Pay rise or working more hours

Return to work after illness, parental leave, childcare or looking after ill people or people in need of care

Change of job or new job

Change in household composition

Increase in social benefits or transfer payments

Indexation or reassessment of salary (only for employees in Belgium or Luxembourg)

Other reasons

What is the main reason for the decrease in net household income?

(Voluntary question)

Lower wage/salary or working fewer hours (includes also involuntary switch to self-employment)

Parental leave, childcare or looking after ill people or people in need of care

New job

Loss of job, unemployment (including closure of own enterprise in case of selfemployment)

Inability to work due to illness, need of care or disability

Divorce, dissolution of partnership or other changes in household composition

Retirement

Reduction of social benefits or transfer payments

Other reasons

Question 267

What development of your net household income do you expect for the next 12 months? (Voluntary question)

The future net household income...

will increase.

will remain unchanged.

will decrease.

Question 268

Are you 15 years or older?

Yes

No

Topic: Educational and vocational attainment

Question 269

Do you hold a general school certificate?

Yes

No/Not yet

Which is your highest qualification?

Please convert qualifications gained abroad to German equivalents.

School certificate obtained after no more than 7 years of school attendance Secondary general school certificate (also former school type starting with grade 1) School of general education in the GDR

school certificate obtained after grade 8 or 9

school certificate obtained after grade 10

Intermediate school certificate, intermediate school-leaving certificate or equivalent

Entrance qualification for universities of applied sciences

Higher education entrance qualification (general or subject-restricted)

Certificate of special school

Question 271

Did you obtain your general school certificate in Germany or abroad?

Germany

Abroad

Question 272

How long did you attend school?

Please round to the nearest year.

Number of years in school

Question 273

Do you have a vocational training qualification or a higher education degree?

People who have completed a pre-vocational training year, on-the-job training or an internship of at least 12 months should also indicate "Yes" here. A higher education degree also includes a degree from a university of applied sciences.

Yes

No/Not yet

Question 274

In what year did you obtain your highest qualification from a school of general education?

Year

Not applicable as I have no general school certificate (yet).

Question 275

In what year did you obtain your highest vocational qualification or your higher education degree?

Year

Did you obtain your highest vocational qualification or higher education degree in Germany or abroad?

Germany

Abroad

Question 277

Which is your highest qualification?

Please convert qualifications gained abroad to German equivalents.

Vocational qualification attained

On-the-job training

Internship

Pre-vocational training year

Apprenticeship, vocational training in the dual system

Certificate qualifying for an occupation obtained from a full-time vocational school or from a secondary school offering general as well as vocational education to pupils aged 16 to 19

Preparatory training for the intermediate service in public administration

Training centre/school for health-care service occupations and social occupations:

one year (e.g. geriatric care assistant)

two years (e.g. masseur/masseuse, pharmaceutical laboratory assistant)

three years (e.g. physiotherapy, medical laboratory assistant, geriatric care)

Nursery teacher/educator

Master craftsman/craftswoman

Technician's qualification or equivalent trade and technical school certificate

Specialised and engineering schools of the GDR

Specialised academy (in Bayern only)

Higher education institutions

Diplom degree, Bachelor's, Master's, state examination e.g. for the teaching profession

Vocational academy

College of public administration

University of applied sciences (also college of engineering), cooperative state university (in Baden-Württemberg, Schleswig-Holstein and Thüringen)

University (also college of art and music, college of education, college of theology)

Doctoral degree

Question 278

What is the title of the highest degree you obtained from a higher education institution?

Bachelor's

Master's

Diplom degree, state examination e.g. for the teaching profession, artistic and comparable degrees

Did you work on your doctorate in the reference week or the preceding 12 months?

This refers only to doctorates that are supported by a doctoral supervisor.

Yes

No

Question 280

In what (main) field did you obtain your highest vocational qualification or higher education degree?

Fields of vocational training are e.g. care for the elderly, floristry, bricklayer, mechatronics technician, care assistant, industrial clerk. Fields of study are e.g. mechanical engineering, production engineering, agricultural science, teacher training course (grammar school).

Topic: Continuing education and training

Question 281

In the 4 weeks before the reference week, did you participate in continuing general or vocational training, such as courses, seminars, training sessions or workshops?

By training, we mean all continuing education measures

- in your free time or in a professional context,
- in person, online or directly at the workplace
- irrespective of their duration (over a longer period or just one hour)

It also includes continuing education that is still ongoing. Continuing general training includes measures such as language courses, computer courses, training courses, health education or political education courses, first-aid courses, private lessons, training for voluntary work. Continuing vocational training includes measures such as training by superiors, colleagues or trainers, advanced training (e.g. EDP, IT, rhetoric, soft skills) or courses and further training programmes to adapt to new (technological) developments or to prepare for new tasks in the job.

Yes

No

Topic: Pension insurance

Question 282

Do you receive an old-age pension from statutory pension insurance?

Yes

Were you insured under the statutory pension insurance scheme in the reference week?

Yes, compulsorily insured Yes, voluntarily insured No

Topic: Internet access and internet use

Question 284

Did you use the internet in the last 3 months?

You may have used the internet at any location (at home, at work or other places) via any internet-enabled device (e.g. desktop PC, laptop, tablet, smartphone, game console, e-book reader). Please note: Internet use also includes receiving/sending e-mails, messaging (e.g. via WhatsApp), gaming, streaming, online/mobile banking.

Yes

No

Question 285

Is this dwelling your main residence?

Yes

No

Question 286

Were you aged 16 years or over on 31 December 2024?

Yes

Topic: Health insurance coverage

Question 287

What kind of health insurance did you have in 2024?

For each kind of insurance, please enter the number of months in which you were covered by the respective insurance policy.

By statutory health insurance

Compulsory insurance for myself (number of months)

Voluntary insurance for myself (number of months)

Family member's insurance (number of months)

Student covered by students' health insurance (number of months)

Student covered by voluntary insurance (number of months)

Private health insurance

Insurance for myself (number of months)

Family member's insurance (number of months)

Student's insurance (number of months)

I was entitled to free statutory medical care for soldiers etc. (number of months)

I was not insured (number of months)

Topic: Your health

Question 288

How is your health in general?

(Voluntary question)

Please mark only one box.

Very good

Good

Fair

Bad

Very bad

Question 289

Do you have any chronic illness or long-standing health problem?

(Voluntary question)

This refers to illnesses or health problems that have lasted or are expected to last for at least 6 months.

Yes

Are you restricted from activities in normal everyday life due to a health problem? Would you say you are ...

(Voluntary question)

Severely limited Limited but not severely Not limited

Question 291

How long have you been affected by these limitations?

(Voluntary question)

Less than 6 months 6 months or more

Ouestion 292

Was there any time in the last 12 months when you really needed dental or orthodontic examination or treatment for yourself?

(Voluntary question)

Yes

No, no need for any examination or treatment.

Question 293

Did you have a medical examination or treatment each time you needed it?

(Voluntary question)

Yes

No, there was at least one occasion when I did not have an examination or treatment.

Question 294

What was the main reason for not having a dental/orthodontic examination or treatment?

(Voluntary question)

Please mark only one box.

I could not afford it (too expensive).

I felt the waiting time for an appointment or examination was too long.

I could not take the time because of work or family responsibilities.

It was too far away for me./I had no means of transport.

I am afraid of dentists/orthodontists, hospitals, examinations or treatment.

I wanted to wait and see if the problem got better on its own.

I don't know any good dentist or orthodontist.

I had other reasons.

Was there any time in the last 12 months when you really needed any other medical examination or treatment for yourself?

(Voluntary question)

Yes

No, no need for any examination or treatment.

Question 296

Did you have a medical examination or treatment each time you needed it?

(Voluntary question)

Yes

No, there was at least one occasion when I did not have an examination or treatment.

Question 297

What was your main reason for not having this other medical examination or treatment?

(Voluntary question)

Please mark only one box.

I could not afford it (too expensive).

I felt the waiting time for an appointment or examination was too long.

I could not take the time because of work or family responsibilities.

It was too far away for me./I had no means of transport.

I am afraid of doctors, hospitals, examinations or treatment.

I wanted to wait and see if the problem got better on its own.

I don't know any good doctor.

I had other reasons.

Topic: Medical care and health determinants

Question 298

How often have you consulted a dentist, orthodontist or other dental care specialists in the last 12 months to get advice, an examination or treatment for yourself?

(Voluntary question)

Never

1 to 2 times

3 to 5 times

6 to 9 times

10 times or more

How often have you consulted a family doctor or a general practitioner in the last 12 months to get advice, an examination or treatment for yourself?

(Voluntary question)

Please include consultations in a medical practice, home visits and telephone consultations.

Never

1 to 2 times

3 to 5 times

6 to 9 times

10 times or more

Question 300

How often have you consulted a medical specialist (e.g. ophthalmologist, dermatologist, orthopaedist, gynaecologist, physiotherapist, psychotherapist) in the last 12 months to get advice, an examination or treatment for yourself?

(Voluntary question)

Please include accident and emergency units involved in a medical emergency. This dos not refer to consultations with a dentist, general practitioner/family doctor or medical contacts you had as an in-patient/day patient in a hospital.

Never

1 to 2 times

3 to 5 times

6 to 9 times

10 times or more

Question 301

What is your weight when wearing neither clothes nor shoes?

(Voluntary question)

If you are pregnant, please enter your weight before the pregnancy.

Please enter your weight in kg.

Weight in kg

Question 302

What is your height when not wearing shoes?

(Voluntary question)

Please enter your height in cm.

Height in cm

When you work, which of the following statements describes best what you do in a typical week of work?Would you say ...

(Voluntary question)

Mostly sitting

Mostly standing

Mostly walking or tasks of moderate physical effort

Mostly heavy labour or physically demanding work

I do not do any work-related activities.

Ouestion 304

Think of sports, fitness and physical leisure activities, e.g. (Nordic) walking, ball games, jogging, cycling, swimming, aerobic, rowing or badminton.In a typical week, how often do you do sports, fitness or physical activities for at least 10 minutes without interruption in your leisure time?

(Voluntary question)

Twice or several times a day

Once a day

4 to 6 times a week

1 to 3 times a week

Less than once a week

Never

Question 305

How often do you eat fruit?

(Voluntary question)

Please include dried, frozen and tinned fruit. This does not refer to fruit juices.

Twice or several times a day

Once a day

4 to 6 times a week

1 to 3 times a week

Less than once a week

Never

Question 306

How often do you eat vegetables or salad?

(Voluntary question)

Please include dried, frozen and tinned vegetables. This does not refer to potatoes or vegetable juices.

Twice or several times a day

Once a day

4 to 6 times a week

1 to 3 times a week

Less than once a week

Never

How often have you smoked tobacco products (e.g. cigarettes, pipe tobacco, water pipe) in the last 12 months? This includes electronic cigarettes or similar electronic products, e.g. e-shisha, e-pipe.

(Voluntary question)

Daily

A few times a week

A few times a month

At few times in the year

Not at all

Question 308

How often have you drunk alcohol of any kind (e.g. beer, wine, sparkling wine, spirits, cocktails, mixed alcoholic drinks, liqueurs, home-made or home-distilled alcohol) in the last 12 months?

(Voluntary question)

Daily

A few times a week

A few times a month

At few times in the year

Not at all

Topic: Ability to do basic activities

The following questions refer to your ability to do various basic activities. Please ignore any temporary problems.

Question 309

Do you have difficulty in seeing, even when wearing glasses or contact lenses? Would you say

•••

(Voluntary question)

No difficulty

Some difficulty

A lot of difficulty

Cannot see at all

Question 310

Do you have difficulty in hearing, even when using a hearing aid?Would you say ...

(Voluntary question)

No difficulty

Some difficulty

A lot of difficulty

Cannot hear at all

Do you have difficulty in walking or climbing steps?Would you say ...

(Voluntary question)

No difficulty

Some difficulty

A lot of difficulty

Cannot walk or climb steps at all

Question 312

Do you have difficulty in remembering or concentrating? Would you say ...

(Voluntary question)

No difficulty

Some difficulty

A lot of difficulty

Cannot remember/focus at all

Question 313

Do you have difficulty with self-care such as washing all over, taking a shower or dressing? Would you say ...

(Voluntary question)

No difficulty

Some difficulty

A lot of difficulty

Cannot wash or dress at all

Question 314

When using your usual language, do you have difficulty in communicating, e.g. understanding or being understood by others?Would you say ...

(Voluntary question)

No difficulty

Some difficulty

A lot of difficulty

Cannot communicate at all

Topic: Assessment of your life situation

Question 315

Which of the following statements apply to your life situation?

I can replace worn-out clothes by new (not second-hand) ones.

Yes

No, I cannot afford it.

No, for other reasons

I have at least two pairs of properly fitting shoes in a good condition that are suitable for daily activities.

Yes

No, I cannot afford it.

No, for other reasons

I get together with friends or relatives for a drink/meal at least once a month.

Yes

No, I cannot afford it.

No, for other reasons

I regularly participate in leisure activities, even if they cost money (e.g. exercise, sporting events, cinema, concerts).

V۵c

No, I cannot afford it.

No, for other reasons

I spend a small amount of money each week on myself (e.g. for magazines, small gifts or going out for ice cream).

Yes

No, I cannot afford it.

No, for other reasons

I have an internet connection for personal use when I need it (e.g. via smartphone, computer, laptop or tablet).

Yes

No, I cannot afford it.

No, for other reasons

Topic: Well-being

Question 316

Overall, how satisfied are you with your life?

(Voluntary question)

Please answer on a scale from 0 to 10 where "0" is "not at all satisfied" and "10" is "completely satisfied".

Please mark only one box.

0 not at all satisfied

10 completely satisfied

Some say that you can trust most people. Others think that you cannot be careful enough with other people. Do you think that one can trust most people?

(Voluntary question)

Please answer on a scale from 0 to 10 where "0" is "you cannot trust anyone" and "10" is "you can trust most people".

Please mark only one box.

0 You cannot trust anyone

10 You can trust most people

Question 318

Do you have relatives, friends or neighbours you could ask for help? Help of any kind is meant here, e.g. assistance in day-to-day life, or someone to talk to, or material or financial assistance.

This refers to people not living in your household.

Yes

No

Topic: Mobility and the environment (individuals)

Question 319

Were you aged between 16 and 65 years (inclusive) at the end of 2024?

Yes

No

Question 320

Are you in employment or a student/pupil?

Yes

No

Question 321

In usual circumstances, are you able to get to work or your school or university in 1 hour by using public transport, cycling or walking?

(Voluntary question)

Please only consider normal rush hour delays. Do not include unusual delays or traffic jams. Additionally, do not consider days off, public holidays or days you work from home.

Yes

No

Not applicable as I am working/studying full-time from home and do not commute.

Overall, how satisfied are you with the public green spaces in your local area (municipality, town or town/city district)?

(Voluntary question)

Please answer on a scale from 0 to 10 where "0" is "not at all satisfied" and "10" is "completely satisfied".

Please mark only one box.

0 not at all satisfied10 completely satisfied

Don't know

Ouestion 323

The last time your mobile phone broke, did you try to have it repaired?

(Voluntary question)

Yes

No

Not applicable as I have never owned a mobile phone or my phone has never been broken.

Question 324

What did you do with your last mobile phone that was unusable and not working properly? (Voluntary question)

It is still in my home, but I do not currently use it.

I sold it or gave it to someone else.

Es wurde über die Elektroschrottsammlung oder ein Recyclingsystem entsorgt (einschließlich der Entsorgung durch den Händler/Verkäufer).

It was disposed of through electronic waste collection/recycling (including leaving it to the retailer to dispose of).

Other

Not applicable as I have never owned a mobile phone or I am still using my phone.

Question 325

In the last 12 months, which mode of transport did you use most often?

(Voluntary question)

Consider transport for all different activities and different purposes: going to work, school/university, shopping, hobbies, etc.

Car (private, company, rental, taxi, car share, etc.)

Public transport (bus, tram, train, metro, ferry, etc.)

Bicycle (including electric bicycle or electric scooter)

Moped or motorbike (including electric)

Walking

Not applicable as I am unable to leave the house.

In the last 12 months, which was your second most used mode of transport?

(Voluntary question)

Consider transport for all different activities and different purposes: going to work, school/university, shopping, hobbies, etc.

Car (private, company, rental, taxi, car share, etc.)

Public transport (bus, tram, train, metro, ferry, etc.)

Bicycle (including electric bicycle or electric scooter)

Moped or motorbike (including electric)

Walking

Not applicable as no other transport is used.

Question 327

In a typical week, how many hours do you usually spend driving a non-electric car?

(Voluntary question)

Consider your own car, a company car or borrowed cars that you drive in a typical week. Consider all activities and purposes in a typical week: going to work, school/university, shopping, hobbies, etc.

Please indicate "0" hours if you do not drive a car or only drive an electric car.

Hours

Question 328

In the last 12 months, how many private or business flights did you take within Europe?

(Voluntary question)

Please consider round trips as one flight.

One

Two to three

Four or more

No flights

Question 329

In the last 12 months, how many private or business flights did you take to destinations outside Europe?

(Voluntary question)

Please consider round trips as one flight.

One

Two to three

Four or more

No flights

In the last 12 months, how often have you eaten meat, poultry or fish?

(Voluntary question)

Daily

Every week

Less often than every week

Not at all, I am vegetarian or vegan

Question 331

In the last 5 years, has your house/dwelling been damaged by extreme weather events, for example, storms, flooding, hail, heat waves, wildfires, earthquakes, etc.?

(Voluntary question)

Damage that occurred outside the house/dwelling (e.g. damage to the garden, driveway or garage (located in a separate building)) should not be considered.

Yes

No

I don't know.

Topic: Life situation in 2024 - Person 1 (16 years or over)

Question 332

Was your situation unchanged over the entire year of 2024?

If yes, please enter the code from List 332

If no, please enter for each month the code from List 332

January

February

March

April

May

June

July

August

September

October

November

December

Liste 332

Employee, public official (including temporary or professional soldier)	
Full-time	(Ziffer 1
Part-time	(Ziffer 2
Self-employed person, freelancer	
Full-time	(Ziffer 3
Part-time	(Ziffer 4
In marginal employment	(Ziffer 5
Person in employment	
on parental leave	(Ziffer 6
in partial retirement	(Ziffer 7
Apprentice receiving apprenticeship pay	(Ziffer 10
Unpaid family worker in a family business	
Full-time	(Ziffer 11
Part-time	(Ziffer 12
Voluntary social/ecological/cultural year, in the Federal Volunteer Service or in	
voluntary military service	(Ziffer 21
Pupil, person in non-remunerated vocational training, student	(Ziffer 15
Pensioner	
Unemployed	(Ziffer 17
Housewife/househusband	(Ziffer 18
Permanently unfit for work	(Ziffer 19
Other	(Ziffer 20

Topic: Income from employment in 2024

Question 333

Did you receive income (wage/salary) as an employee in 2024?

This includes mini-jobs and remuneration of public officials or judges.

Yes

No

Question 334

Did you receive the following types of income (wage/salary) as an employee or public official in 2024?

Please enter the net amount (income after deduction of taxes and social insurance contributions, if applicable).

Wage/salary from main job (not including extra payments such as Christmas bonus or other bonuses, not including company car and not including children's allowance)

No

Yes

Number of months

Net amount per month

Annual net amount

Net amount per month (full euros)

Annual net amount per month (full euros)

Wage/salary from second job (not including extra payments)

No

Yes

Number of months

Net amount per month

Annual net amount

Amount per montth (full euros)

Annual amount (full euros)

Question 335

Did you receive one or more of the following extra payments in 2024?

Please enter the net amount.

Christmas bonus

No

Yes

Net annual amount (full euros)

Vacation bonus

No

Yes

Net annual amount (full euros)

Other bonuses and shares in profits

No

Yes

Net annual amount (full euros)

Severance pay in case of dismissal for operational reasons (before reaching retirement age)

No

Yes

Net annual amount (full euros)

Severance pay in case of retirement

No

Yes

Net annual amount (full euros)

Early retirement payments

No

Yes

Net annual amount (full euros)

Question 336

What income (wage/salary), including extra payments, did you receive as an employee or public official in 2024?

Please enter the total amount of all income types from questions 334 to 335.

Total amount

Question 337

Did you receive non-cash benefits from the private use of a company car or from payments in kind in 2024?

If you do not know the gross amount of the non-cash benefit, you may enter 1% of the list price of the company car, plus 0.03% of the list price for every kilometre of the distance between your dwelling and your place of work, e.g. a distance of 10 km corresponds to 1.3% of the list price.

Private use of a company car

No

Yes

Number of months

Gross amount per month (full euros)

Payments in kind or discounts (e.g. staff housing, food, free fuel)

No

Yes

Number of months

Net amount per month (full euros)

Did you receive income from self-employment or freelance work in 2024?

Yes

No

Question 339

What was your income from self-employment or freelance work in 2024?

Please also take into account withdrawals in kind or profits from the business assets. If you generated negative income (losses) in total in 2024, please enter this amount with a minus sign.

Income

Topic: Income from pensions in 2024

Question 340

Did you receive pensions based on your own entitlements in 2024?

Yes

No

Ouestion 341

What income from pensions based on your own entitlements did you receive in 2024?

Please enter the amount received, not including health insurance contributions.

Old-age pension from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension (retirement pension)

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension from the supplementary pension funds for public service employees

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Company pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from occupational pension funds or from the agricultural pension fund

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension due to incapacity for work

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Injury pension from statutory accident insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension on account of reduced earning capacity from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from abroad

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

War pension, victim's pension for SED injustice or equalisation of burdens pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 342

Did you receive income from widow's pensions/benefits or orphan's pensions/benefits in 2024?

Please enter the amount received, not including health insurance contributions.

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

What type of widow's pension/benefit or orphan's pension/benefit did you receive in 2024?

Please mark all relevant boxes.

Widow's pension/benefit or orphan's pension/benefit...

from statutory pension insurance

in accordance with the Public Officials Pensions Act

from supplementary pension funds, company pension

from occupational pension funds or the agricultural pension fund

from another country (pension from abroad)

from statutory accident insurance

Other public widow's or orphan's pension

Not applicable

Topic: Income from other public institutions in 2024

Question 344

Did you receive unemployment benefit or other benefits from the employment agency in 2024?

Unemployment benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Support for business start-up; start-up grant

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Short-time working benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Winter benefit

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Insolvency benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 345

Did you receive the following benefits for initial or continuing vocational education and training from the employment agency in 2024?

Citizen's benefit bonus (75 euros per month)

No

Yes

Number of months

Continuing education and training benefit for continuing education that leads to a professional qualification (150 euros per month)

No

Yes

Number of months

Continuing education and training bonus for passing an intermediate examination (1000 euros)

No

Yes

Continuing education and training bonus for passing a final examination (1500 euros)

No

Yes

Transitional allowance, training stipend

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Skills development benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Other grants towards initial or continuing vocational education and training (e.g. travel expenses, cost of accommodation away from home, cost of childcare during training measures)

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 346

Did you receive any of the following benefits in 2024?

Public promotion of education and training (training assistance (BAföG), scholarship/grant), vocational training allowance, grants towards upgrading training under the Upgrading Training Assistance Act

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Parental allowance, parental allowance 'Plus'

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Long-term care allowance from statutory long-term care insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Carer's grant from statutory long-term care insurance

No

Yes

Number of days

Annual amount (full euros)

Maternity payments from statutory health insurance

No

Yes

Number of months

Maternity payments from the Federal Office for Social Security (BAS)

No

Yes

Family childcare allowance (only in Bayern) or Land childcare allowance (only in Sachsen)

No

Yes

Number of months

Sickness pay from statutory health insurance

No

Yes

Number of months

Injury benefit or transitional allowance from statutory accident insurance

No

Yes

Number of months

Transitional allowance from statutory pension insurance

No

Yes

Number of months

Blindness benefit

No

Yes

Number of months

Topic: Private old-age provision and benefits from private old-age provision in 2024

Question 347

Did you make contributions to private old-age provision in 2024 (e.g. to private pension insurance, life assurance, occupational disability insurance or accident insurance)?

No

Yes

Number of months

Amount per month (full euros)

Question 348

Did you receive a pension from private old-age provision in 2024 (e.g. from a life assurance, pension insurance, occupational disability insurance or supplementary long-term care insurance)?

No

Yes

Number of months

Amount per month (full euros)

Topic: Participation in the survey

Question 349

Have you answered the questions yourself?

(Voluntary question)

Yes

No, another household member has answered the questions.

No, someone not living in the household has answered the questions.

Question 350

Which household member has answered the questions?

(Voluntary question)

Please enter the number (see flap) of the person who has answered the questions.

Question 351

How many minutes did it take you to complete the questionnaire?

(Voluntary question)

Number of minutes

Topic: Life situation in 2024 - Person 1 (16 years or over)

Question 332

Was your situation unchanged over the entire year of 2024?

If yes, please enter the code from List 332

If no, please enter for each month the code from List 332

January

February

March

April

May

June

July

August

September

October

November

December

Liste 332

Employee, public official (including temporary or professional soldier)	
Full-time	(Ziffer 1
Part-time	(Ziffer 2
Self-employed person, freelancer	
Full-time	(Ziffer 3
Part-time	(Ziffer 4
In marginal employment	(Ziffer 5
Person in employment	
on parental leave	(Ziffer 6
in partial retirement	(Ziffer 7
Apprentice receiving apprenticeship pay	(Ziffer 10
Unpaid family worker in a family business	
Full-time	(Ziffer 11
Part-time	(Ziffer 12
Voluntary social/ecological/cultural year, in the Federal Volunteer Service or in	
voluntary military service	
Pupil, person in non-remunerated vocational training, student	(Ziffer 15
Pensioner	(Ziffer 16
Unemployed	(Ziffer 17
Housewife/househusband	(Ziffer 18
Permanently unfit for work	(Ziffer 19
Other	(Ziffer 20

Topic: Income from employment in 2024

Question 333

Did you receive income (wage/salary) as an employee in 2024?

This includes mini-jobs and remuneration of public officials or judges.

Yes

No

Question 334

Did you receive the following types of income (wage/salary) as an employee or public official in 2024?

Please enter the net amount (income after deduction of taxes and social insurance contributions, if applicable).

Wage/salary from main job (not including extra payments such as Christmas bonus or other bonuses, not including company car and not including children's allowance)

No

Yes

Number of months

Net amount per month

Annual net amount

Net amount per month (full euros)

Annual net amount per month (full euros)

Wage/salary from second job (not including extra payments)

No

Yes

Number of months

Net amount per month

Annual net amount

Amount per montth (full euros)

Annual amount (full euros)

Question 335

Did you receive one or more of the following extra payments in 2024?

Please enter the net amount.

Christmas bonus

No

Yes

Net annual amount (full euros)

Vacation bonus

No

Yes

Net annual amount (full euros)

Other bonuses and shares in profits

No

Yes

Net annual amount (full euros)

Severance pay in case of dismissal for operational reasons (before reaching retirement age)

No

Yes

Net annual amount (full euros)

Severance pay in case of retirement

No

Yes

Net annual amount (full euros)

Early retirement payments

No

Yes

Net annual amount (full euros)

Question 336

What income (wage/salary), including extra payments, did you receive as an employee or public official in 2024?

Please enter the total amount of all income types from questions 334 to 335.

Total amount

Question 337

Did you receive non-cash benefits from the private use of a company car or from payments in kind in 2024?

If you do not know the gross amount of the non-cash benefit, you may enter 1% of the list price of the company car, plus 0.03% of the list price for every kilometre of the distance between your dwelling and your place of work, e.g. a distance of 10 km corresponds to 1.3% of the list price.

Private use of a company car

No

Yes

Number of months

Gross amount per month (full euros)

Payments in kind or discounts (e.g. staff housing, food, free fuel)

No

Yes

Number of months

Net amount per month (full euros)

Did you receive income from self-employment or freelance work in 2024?

Yes

No

Question 339

What was your income from self-employment or freelance work in 2024?

Please also take into account withdrawals in kind or profits from the business assets. If you generated negative income (losses) in total in 2024, please enter this amount with a minus sign.

Income

Topic: Income from pensions in 2024

Question 340

Did you receive pensions based on your own entitlements in 2024?

Yes

No

Ouestion 341

What income from pensions based on your own entitlements did you receive in 2024?

Please enter the amount received, not including health insurance contributions.

Old-age pension from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension (retirement pension)

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension from the supplementary pension funds for public service employees

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Company pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from occupational pension funds or from the agricultural pension fund

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension due to incapacity for work

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Injury pension from statutory accident insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension on account of reduced earning capacity from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from abroad

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

War pension, victim's pension for SED injustice or equalisation of burdens pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 342

Did you receive income from widow's pensions/benefits or orphan's pensions/benefits in 2024?

Please enter the amount received, not including health insurance contributions.

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

What type of widow's pension/benefit or orphan's pension/benefit did you receive in 2024?

Please mark all relevant boxes.

Widow's pension/benefit or orphan's pension/benefit...

from statutory pension insurance

in accordance with the Public Officials Pensions Act

from supplementary pension funds, company pension

from occupational pension funds or the agricultural pension fund

from another country (pension from abroad)

from statutory accident insurance

Other public widow's or orphan's pension

Not applicable

Topic: Income from other public institutions in 2024

Question 344

Did you receive unemployment benefit or other benefits from the employment agency in 2024?

Unemployment benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Support for business start-up; start-up grant

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Short-time working benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Winter benefit

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Insolvency benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 345

Did you receive the following benefits for initial or continuing vocational education and training from the employment agency in 2024?

Citizen's benefit bonus (75 euros per month)

No

Yes

Number of months

Continuing education and training benefit for continuing education that leads to a professional qualification (150 euros per month)

No

Yes

Number of months

Continuing education and training bonus for passing an intermediate examination (1000 euros)

No

Yes

Continuing education and training bonus for passing a final examination (1500 euros)

No

Yes

Transitional allowance, training stipend

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Skills development benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Other grants towards initial or continuing vocational education and training (e.g. travel expenses, cost of accommodation away from home, cost of childcare during training measures)

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 346

Did you receive any of the following benefits in 2024?

Public promotion of education and training (training assistance (BAföG), scholarship/grant), vocational training allowance, grants towards upgrading training under the Upgrading Training Assistance Act

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Parental allowance, parental allowance 'Plus'

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Long-term care allowance from statutory long-term care insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Carer's grant from statutory long-term care insurance

No

Yes

Number of days

Annual amount (full euros)

Maternity payments from statutory health insurance

No

Yes

Number of months

Maternity payments from the Federal Office for Social Security (BAS)

No

Yes

Family childcare allowance (only in Bayern) or Land childcare allowance (only in Sachsen)

No

Yes

Number of months

Sickness pay from statutory health insurance

No

Yes

Number of months

Injury benefit or transitional allowance from statutory accident insurance

No

Yes

Number of months

Transitional allowance from statutory pension insurance

No

Yes

Number of months

Blindness benefit

No

Yes

Number of months

Topic: Private old-age provision and benefits from private old-age provision in 2024

Question 347

Did you make contributions to private old-age provision in 2024 (e.g. to private pension insurance, life assurance, occupational disability insurance or accident insurance)?

No

Yes

Number of months

Amount per month (full euros)

Question 348

Did you receive a pension from private old-age provision in 2024 (e.g. from a life assurance, pension insurance, occupational disability insurance or supplementary long-term care insurance)?

No

Yes

Number of months

Amount per month (full euros)

Topic: Participation in the survey

Question 349

Have you answered the questions yourself?

(Voluntary question)

Yes

No, another household member has answered the questions.

No, someone not living in the household has answered the questions.

Question 350

Which household member has answered the questions?

(Voluntary question)

Please enter the number (see flap) of the person who has answered the questions.

Question 351

How many minutes did it take you to complete the questionnaire?

(Voluntary question)

Number of minutes

Topic: Life situation in 2024 - Person 1 (16 years or over)

Question 332

Was your situation unchanged over the entire year of 2024?

If yes, please enter the code from List 332

If no, please enter for each month the code from List 332

January

February

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April May

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July

August

September

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November

December

Liste 332

Employee, public official (including temporary or professional soldier)	
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Part-time	(Ziffer 2
Self-employed person, freelancer	
Full-time	(Ziffer 3
Part-time	(Ziffer 4
In marginal employment	(Ziffer 5
Person in employment	
on parental leave	(Ziffer 6
in partial retirement	(Ziffer 7
Apprentice receiving apprenticeship pay	(Ziffer 10
Unpaid family worker in a family business	
Full-time	(Ziffer 11
Part-time	(Ziffer 12
Voluntary social/ecological/cultural year, in the Federal Volunteer Service or in	
voluntary military service	(Ziffer 21
Pupil, person in non-remunerated vocational training, student	(Ziffer 15
Pensioner	
Unemployed	(Ziffer 17
Housewife/househusband	(Ziffer 18
Permanently unfit for work	(Ziffer 19
Other	(Ziffer 20

Topic: Income from employment in 2024

Question 333

Did you receive income (wage/salary) as an employee in 2024?

This includes mini-jobs and remuneration of public officials or judges.

Yes

No

Question 334

Did you receive the following types of income (wage/salary) as an employee or public official in 2024?

Please enter the net amount (income after deduction of taxes and social insurance contributions, if applicable).

Wage/salary from main job (not including extra payments such as Christmas bonus or other bonuses, not including company car and not including children's allowance)

No

Yes

Number of months

Net amount per month

Annual net amount

Net amount per month (full euros)

Annual net amount per month (full euros)

Wage/salary from second job (not including extra payments)

No

Yes

Number of months

Net amount per month

Annual net amount

Amount per montth (full euros)

Annual amount (full euros)

Question 335

Did you receive one or more of the following extra payments in 2024?

Please enter the net amount.

Christmas bonus

No

Yes

Net annual amount (full euros)

Vacation bonus

No

Yes

Net annual amount (full euros)

Other bonuses and shares in profits

No

Yes

Net annual amount (full euros)

Severance pay in case of dismissal for operational reasons (before reaching retirement age)

No

Yes

Net annual amount (full euros)

Severance pay in case of retirement

No

Yes

Net annual amount (full euros)

Early retirement payments

No

Yes

Net annual amount (full euros)

Question 336

What income (wage/salary), including extra payments, did you receive as an employee or public official in 2024?

Please enter the total amount of all income types from questions 334 to 335.

Total amount

Question 337

Did you receive non-cash benefits from the private use of a company car or from payments in kind in 2024?

If you do not know the gross amount of the non-cash benefit, you may enter 1% of the list price of the company car, plus 0.03% of the list price for every kilometre of the distance between your dwelling and your place of work, e.g. a distance of 10 km corresponds to 1.3% of the list price.

Private use of a company car

No

Yes

Number of months

Gross amount per month (full euros)

Payments in kind or discounts (e.g. staff housing, food, free fuel)

No

Yes

Number of months

Net amount per month (full euros)

Did you receive income from self-employment or freelance work in 2024?

Yes

No

Question 339

What was your income from self-employment or freelance work in 2024?

Please also take into account withdrawals in kind or profits from the business assets. If you generated negative income (losses) in total in 2024, please enter this amount with a minus sign.

Income

Topic: Income from pensions in 2024

Question 340

Did you receive pensions based on your own entitlements in 2024?

Yes

No

Ouestion 341

What income from pensions based on your own entitlements did you receive in 2024?

Please enter the amount received, not including health insurance contributions.

Old-age pension from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension (retirement pension)

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension from the supplementary pension funds for public service employees

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Company pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from occupational pension funds or from the agricultural pension fund

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension due to incapacity for work

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Injury pension from statutory accident insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension on account of reduced earning capacity from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from abroad

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

War pension, victim's pension for SED injustice or equalisation of burdens pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 342

Did you receive income from widow's pensions/benefits or orphan's pensions/benefits in 2024?

Please enter the amount received, not including health insurance contributions.

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Question 343

What type of widow's pension/benefit or orphan's pension/benefit did you receive in 2024?

Please mark all relevant boxes.

Widow's pension/benefit or orphan's pension/benefit...

from statutory pension insurance

in accordance with the Public Officials Pensions Act

from supplementary pension funds, company pension

from occupational pension funds or the agricultural pension fund

from another country (pension from abroad)

from statutory accident insurance

Other public widow's or orphan's pension

Not applicable

Topic: Income from other public institutions in 2024

Question 344

Did you receive unemployment benefit or other benefits from the employment agency in 2024?

Unemployment benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Support for business start-up; start-up grant

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Short-time working benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Winter benefit

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Insolvency benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 345

Did you receive the following benefits for initial or continuing vocational education and training from the employment agency in 2024?

Citizen's benefit bonus (75 euros per month)

No

Yes

Number of months

Continuing education and training benefit for continuing education that leads to a professional qualification (150 euros per month)

No

Yes

Number of months

Continuing education and training bonus for passing an intermediate examination (1000 euros)

No

Yes

Continuing education and training bonus for passing a final examination (1500 euros)

No

Yes

Transitional allowance, training stipend

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Skills development benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Other grants towards initial or continuing vocational education and training (e.g. travel expenses, cost of accommodation away from home, cost of childcare during training measures)

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 346

Did you receive any of the following benefits in 2024?

Public promotion of education and training (training assistance (BAföG), scholarship/grant), vocational training allowance, grants towards upgrading training under the Upgrading Training Assistance Act

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Parental allowance, parental allowance 'Plus'

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Long-term care allowance from statutory long-term care insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Carer's grant from statutory long-term care insurance

No

Yes

Number of days

Annual amount (full euros)

Maternity payments from statutory health insurance

No

Yes

Number of months

Maternity payments from the Federal Office for Social Security (BAS)

No

Yes

Family childcare allowance (only in Bayern) or Land childcare allowance (only in Sachsen)

No

Yes

Number of months

Sickness pay from statutory health insurance

No

Yes

Number of months

Injury benefit or transitional allowance from statutory accident insurance

No

Yes

Number of months

Transitional allowance from statutory pension insurance

No

Yes

Number of months

Blindness benefit

No

Yes

Number of months

Topic: Private old-age provision and benefits from private old-age provision in 2024

Question 347

Did you make contributions to private old-age provision in 2024 (e.g. to private pension insurance, life assurance, occupational disability insurance or accident insurance)?

No

Yes

Number of months

Amount per month (full euros)

Question 348

Did you receive a pension from private old-age provision in 2024 (e.g. from a life assurance, pension insurance, occupational disability insurance or supplementary long-term care insurance)?

No

Yes

Number of months

Amount per month (full euros)

Topic: Participation in the survey

Question 349

Have you answered the questions yourself?

(Voluntary question)

Yes

No, another household member has answered the questions.

No, someone not living in the household has answered the questions.

Question 350

Which household member has answered the questions?

(Voluntary question)

Please enter the number (see flap) of the person who has answered the questions.

Question 351

How many minutes did it take you to complete the questionnaire?

(Voluntary question)

Number of minutes

Topic: Life situation in 2024 - Person 1 (16 years or over)

Question 332

Was your situation unchanged over the entire year of 2024?

If yes, please enter the code from List 332

If no, please enter for each month the code from List 332

January

February

March

April

May

June

July

August

September

October

November

December

Liste 332

Employee, public official (including temporary or professional soldier)	
Full-time	(Ziffer 1
Part-time	(Ziffer 2
Self-employed person, freelancer	
Full-time	(Ziffer 3
Part-time	(Ziffer 4
In marginal employment	(Ziffer 5
Person in employment	
on parental leave	(Ziffer 6
in partial retirement	(Ziffer 7
Apprentice receiving apprenticeship pay	(Ziffer 10
Unpaid family worker in a family business	
Full-time	(Ziffer 11
Part-time	(Ziffer 12
Voluntary social/ecological/cultural year, in the Federal Volunteer Service or in	า
voluntary military service	(Ziffer 21
Pupil, person in non-remunerated vocational training, student	(Ziffer 15
Pensioner	(Ziffer 16
Unemployed	(Ziffer 17
Housewife/househusband	(Ziffer 18
Permanently unfit for work	(Ziffer 19
Other	(Ziffer 20

Topic: Income from employment in 2024

Question 333

Did you receive income (wage/salary) as an employee in 2024?

This includes mini-jobs and remuneration of public officials or judges.

Yes

No

Question 334

Did you receive the following types of income (wage/salary) as an employee or public official in 2024?

Please enter the net amount (income after deduction of taxes and social insurance contributions, if applicable).

Wage/salary from main job (not including extra payments such as Christmas bonus or other bonuses, not including company car and not including children's allowance)

No

Yes

Number of months

Net amount per month

Annual net amount

Net amount per month (full euros)

Annual net amount per month (full euros)

Wage/salary from second job (not including extra payments)

No

Yes

Number of months

Net amount per month

Annual net amount

Amount per montth (full euros)

Annual amount (full euros)

Question 335

Did you receive one or more of the following extra payments in 2024?

Please enter the net amount.

Christmas bonus

No

Yes

Net annual amount (full euros)

Vacation bonus

No

Yes

Net annual amount (full euros)

Other bonuses and shares in profits

No

Yes

Net annual amount (full euros)

Severance pay in case of dismissal for operational reasons (before reaching retirement age)

No

Yes

Net annual amount (full euros)

Severance pay in case of retirement

No

Yes

Net annual amount (full euros)

Early retirement payments

No

Yes

Net annual amount (full euros)

Question 336

What income (wage/salary), including extra payments, did you receive as an employee or public official in 2024?

Please enter the total amount of all income types from questions 334 to 335.

Total amount

Question 337

Did you receive non-cash benefits from the private use of a company car or from payments in kind in 2024?

If you do not know the gross amount of the non-cash benefit, you may enter 1% of the list price of the company car, plus 0.03% of the list price for every kilometre of the distance between your dwelling and your place of work, e.g. a distance of 10 km corresponds to 1.3% of the list price.

Private use of a company car

No

Yes

Number of months

Gross amount per month (full euros)

Payments in kind or discounts (e.g. staff housing, food, free fuel)

No

Yes

Number of months

Net amount per month (full euros)

Question 338

Did you receive income from self-employment or freelance work in 2024?

Yes

No

Question 339

What was your income from self-employment or freelance work in 2024?

Please also take into account withdrawals in kind or profits from the business assets. If you generated negative income (losses) in total in 2024, please enter this amount with a minus sign.

Income

Topic: Income from pensions in 2024

Question 340

Did you receive pensions based on your own entitlements in 2024?

Yes

No

Ouestion 341

What income from pensions based on your own entitlements did you receive in 2024?

Please enter the amount received, not including health insurance contributions.

Old-age pension from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension (retirement pension)

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension from the supplementary pension funds for public service employees

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Company pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from occupational pension funds or from the agricultural pension fund

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension due to incapacity for work

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Injury pension from statutory accident insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension on account of reduced earning capacity from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from abroad

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

War pension, victim's pension for SED injustice or equalisation of burdens pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 342

Did you receive income from widow's pensions/benefits or orphan's pensions/benefits in 2024?

Please enter the amount received, not including health insurance contributions.

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Question 343

What type of widow's pension/benefit or orphan's pension/benefit did you receive in 2024?

Please mark all relevant boxes.

Widow's pension/benefit or orphan's pension/benefit...

from statutory pension insurance

in accordance with the Public Officials Pensions Act

from supplementary pension funds, company pension

from occupational pension funds or the agricultural pension fund

from another country (pension from abroad)

from statutory accident insurance

Other public widow's or orphan's pension

Not applicable

Topic: Income from other public institutions in 2024

Question 344

Did you receive unemployment benefit or other benefits from the employment agency in 2024?

Unemployment benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Support for business start-up; start-up grant

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Short-time working benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Winter benefit

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Insolvency benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 345

Did you receive the following benefits for initial or continuing vocational education and training from the employment agency in 2024?

Citizen's benefit bonus (75 euros per month)

No

Yes

Number of months

Continuing education and training benefit for continuing education that leads to a professional qualification (150 euros per month)

No

Yes

Number of months

Continuing education and training bonus for passing an intermediate examination (1000 euros)

No

Yes

Continuing education and training bonus for passing a final examination (1500 euros)

No

Yes

Transitional allowance, training stipend

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Skills development benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Other grants towards initial or continuing vocational education and training (e.g. travel expenses, cost of accommodation away from home, cost of childcare during training measures)

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 346

Did you receive any of the following benefits in 2024?

Public promotion of education and training (training assistance (BAföG), scholarship/grant), vocational training allowance, grants towards upgrading training under the Upgrading Training Assistance Act

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Parental allowance, parental allowance 'Plus'

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Long-term care allowance from statutory long-term care insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Carer's grant from statutory long-term care insurance

No

Yes

Number of days

Annual amount (full euros)

Maternity payments from statutory health insurance

No

Yes

Number of months

Maternity payments from the Federal Office for Social Security (BAS)

No

Yes

Family childcare allowance (only in Bayern) or Land childcare allowance (only in Sachsen)

No Yes

Number of months

Sickness pay from statutory health insurance

No

Yes

Number of months

Injury benefit or transitional allowance from statutory accident insurance

No

Yes

Number of months

Transitional allowance from statutory pension insurance

No

Yes

Number of months

Blindness benefit

No

Yes

Number of months

Topic: Private old-age provision and benefits from private old-age provision in 2024

Question 347

Did you make contributions to private old-age provision in 2024 (e.g. to private pension insurance, life assurance, occupational disability insurance or accident insurance)?

No

Yes

Number of months

Amount per month (full euros)

Question 348

Did you receive a pension from private old-age provision in 2024 (e.g. from a life assurance, pension insurance, occupational disability insurance or supplementary long-term care insurance)?

No

Yes

Number of months

Amount per month (full euros)

Topic: Participation in the survey

Question 349

Have you answered the questions yourself?

(Voluntary question)

Yes

No, another household member has answered the questions.

No, someone not living in the household has answered the questions.

Question 350

Which household member has answered the questions?

(Voluntary question)

Please enter the number (see flap) of the person who has answered the questions.

Question 351

How many minutes did it take you to complete the questionnaire?

(Voluntary question)

Number of minutes

Topic: Life situation in 2024 - Person 1 (16 years or over)

Question 332

Was your situation unchanged over the entire year of 2024?

If yes, please enter the code from List 332

If no, please enter for each month the code from List 332

January

February

March

April

May

June

July

August

September

October

November

December

Liste 332

Employee, public official (including temporary or professional soldier)	
Full-time	(Ziffer 1
Part-time	(Ziffer 2
Self-employed person, freelancer	
Full-time	(Ziffer 3
Part-time	(Ziffer 4
In marginal employment	(Ziffer 5
Person in employment	
on parental leave	(Ziffer 6
in partial retirement	(Ziffer 7
Apprentice receiving apprenticeship pay	Ziffer 10
Unpaid family worker in a family business	
Full-time(Ziffer 11
Part-time(Ziffer 12
Voluntary social/ecological/cultural year, in the Federal Volunteer Service or in	
voluntary military service	Ziffer 21
Pupil, person in non-remunerated vocational training, student	(Ziffer 15
Pensioner	Ziffer 16
Unemployed	Ziffer 17
Housewife/househusband	Ziffer 18
Permanently unfit for work	Ziffer 19
Other	Ziffer 20

Topic: Income from employment in 2024

Question 333

Did you receive income (wage/salary) as an employee in 2024?

This includes mini-jobs and remuneration of public officials or judges.

Yes

No

Question 334

Did you receive the following types of income (wage/salary) as an employee or public official in 2024?

Please enter the net amount (income after deduction of taxes and social insurance contributions, if applicable).

Wage/salary from main job (not including extra payments such as Christmas bonus or other bonuses, not including company car and not including children's allowance)

No

Yes

Number of months

Net amount per month

Annual net amount

Net amount per month (full euros)

Annual net amount per month (full euros)

Wage/salary from second job (not including extra payments)

No

Yes

Number of months

Net amount per month

Annual net amount

Amount per montth (full euros)

Annual amount (full euros)

Question 335

Did you receive one or more of the following extra payments in 2024?

Please enter the net amount.

Christmas bonus

No

Yes

Net annual amount (full euros)

Vacation bonus

No

Yes

Net annual amount (full euros)

Other bonuses and shares in profits

No

Yes

Net annual amount (full euros)

Severance pay in case of dismissal for operational reasons (before reaching retirement age)

No

Yes

Net annual amount (full euros)

Severance pay in case of retirement

No

Yes

Net annual amount (full euros)

Early retirement payments

No

Yes

Net annual amount (full euros)

Question 336

What income (wage/salary), including extra payments, did you receive as an employee or public official in 2024?

Please enter the total amount of all income types from questions 334 to 335.

Total amount

Question 337

Did you receive non-cash benefits from the private use of a company car or from payments in kind in 2024?

If you do not know the gross amount of the non-cash benefit, you may enter 1% of the list price of the company car, plus 0.03% of the list price for every kilometre of the distance between your dwelling and your place of work, e.g. a distance of 10 km corresponds to 1.3% of the list price.

Private use of a company car

No

Yes

Number of months

Gross amount per month (full euros)

Payments in kind or discounts (e.g. staff housing, food, free fuel)

No

Yes

Number of months

Net amount per month (full euros)

Question 338

Did you receive income from self-employment or freelance work in 2024?

Yes

No

Question 339

What was your income from self-employment or freelance work in 2024?

Please also take into account withdrawals in kind or profits from the business assets. If you generated negative income (losses) in total in 2024, please enter this amount with a minus sign.

Income

Topic: Income from pensions in 2024

Question 340

Did you receive pensions based on your own entitlements in 2024?

Yes

No

Ouestion 341

What income from pensions based on your own entitlements did you receive in 2024?

Please enter the amount received, not including health insurance contributions.

Old-age pension from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension (retirement pension)

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension from the supplementary pension funds for public service employees

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Company pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from occupational pension funds or from the agricultural pension fund

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Public official's pension due to incapacity for work

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Injury pension from statutory accident insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Pension on account of reduced earning capacity from statutory pension insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Pension from abroad

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

War pension, victim's pension for SED injustice or equalisation of burdens pension

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 342

Did you receive income from widow's pensions/benefits or orphan's pensions/benefits in 2024?

Please enter the amount received, not including health insurance contributions.

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Question 343

What type of widow's pension/benefit or orphan's pension/benefit did you receive in 2024?

Please mark all relevant boxes.

Widow's pension/benefit or orphan's pension/benefit...

from statutory pension insurance

in accordance with the Public Officials Pensions Act

from supplementary pension funds, company pension

from occupational pension funds or the agricultural pension fund

from another country (pension from abroad)

from statutory accident insurance

Other public widow's or orphan's pension

Not applicable

Topic: Income from other public institutions in 2024

Question 344

Did you receive unemployment benefit or other benefits from the employment agency in 2024?

Unemployment benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Support for business start-up; start-up grant

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Short-time working benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Winter benefit

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Insolvency benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 345

Did you receive the following benefits for initial or continuing vocational education and training from the employment agency in 2024?

Citizen's benefit bonus (75 euros per month)

No

Yes

Number of months

Continuing education and training benefit for continuing education that leads to a professional qualification (150 euros per month)

No

Yes

Number of months

Continuing education and training bonus for passing an intermediate examination (1000 euros)

No

Yes

Continuing education and training bonus for passing a final examination (1500 euros)

No

Yes

Transitional allowance, training stipend

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Skills development benefit

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Other grants towards initial or continuing vocational education and training (e.g. travel expenses, cost of accommodation away from home, cost of childcare during training measures)

Nο

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Question 346

Did you receive any of the following benefits in 2024?

Public promotion of education and training (training assistance (BAföG), scholarship/grant), vocational training allowance, grants towards upgrading training under the Upgrading Training Assistance Act

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Parental allowance, parental allowance 'Plus'

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Long-term care allowance from statutory long-term care insurance

No

Yes

Number of months

Amount per month

Annual amount

Amount per month (full euros)

Annual amount (full euros)

Carer's grant from statutory long-term care insurance

No

Yes

Number of days

Annual amount (full euros)

Maternity payments from statutory health insurance

No

Yes

Number of months

Maternity payments from the Federal Office for Social Security (BAS)

No

Yes

Family childcare allowance (only in Bayern) or Land childcare allowance (only in Sachsen)

No Yes

Number of months

Sickness pay from statutory health insurance

No

Yes

Number of months

Injury benefit or transitional allowance from statutory accident insurance

No

Yes

Number of months

Transitional allowance from statutory pension insurance

No

Yes

Number of months

Blindness benefit

No

Yes

Number of months

Topic: Private old-age provision and benefits from private old-age provision in 2024

Question 347

Did you make contributions to private old-age provision in 2024 (e.g. to private pension insurance, life assurance, occupational disability insurance or accident insurance)?

No

Yes

Number of months

Amount per month (full euros)

Question 348

Did you receive a pension from private old-age provision in 2024 (e.g. from a life assurance, pension insurance, occupational disability insurance or supplementary long-term care insurance)?

No

Yes

Number of months

Amount per month (full euros)

Topic: Participation in the survey

Question 349

Have you answered the questions yourself?

(Voluntary question)

Yes

No, another household member has answered the questions.

No, someone not living in the household has answered the questions.

Question 350

Which household member has answered the questions?

(Voluntary question)

Please enter the number (see flap) of the person who has answered the questions.

Question 351

How many minutes did it take you to complete the questionnaire?

(Voluntary question)

Number of minutes

