

**THIS PAGE FOR USE BY SUPERVISOR ONLY**

Supervisor Name \_\_\_\_\_  
Date\_\_\_\_\_

Supervisor Number \_\_\_\_\_

1. Ensure that that IDD is transferred correctly from the Control Form to the Questionnaire

CIRCLE  
CODE

- 1 Interviewer correctly specified IDD
- 2 Supervisor corrected IDD
- 3 IDD is missing and cannot be reconstructed

2. Ensure that sex and date of birth are consistent across the Control Form and Questionnaire for all persons aged 15 and over

CIRCLE  
CODE

- 1 Interviewer correctly specified sex and date of birth
- 2 Supervisor corrected sex and date of birth for ID (s)  
(Please circle) 01 02 03 04 05 06 07 08 09 10 11 12 13 14
- 3 Sex and date of birth is missing and cannot be reconstructed for IDs  
(Please circle) 01 02 03 04 05 06 07 08 09 10 11 12 13 14

INITIAL IF PASSED CHECK\_\_\_\_\_