

AFRICAN POPULATION AND HEALTH RESEARCH CENTRE
NAIROBI URBAN HEALTH AND DEMOGRAPHIC SURVEILLANCE SYSTEM (NUHDSS)
CHANGE OF RESIDENCE EXIT FORM

1 BACKGROUND

1.1 START TIME

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1.2 NAME OF PERSON WHO HAS CHANGED RESIDENCE

1.3 ID OF PERSON WHO HAS MOVED

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1.4 ID OF ROOM OF HOUSEHOLD HEAD

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1.5 RESULT OF INTERVIEW (CODE SHEET A⁷)

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2 DESTINATION AND MAIN REASON FOR CHANGING RESIDENCE

2.1 Please, describe the place where (NAME) moved to
(RECORD DESCRIPTION OF THE DSA LOCATION WHERE THE PERSON MOVED TO USING
VILAGE NAME, LANDMARKS, SHOPS, BARS, KIOSKS, CHURCHES, SCHOOLS, ETC)
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2.2 FW: YOU MUST RECORD ID OF SLEEPING ROOM WHERE PERSON MOVED TO

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2.3 What was the most important reason why (NAME) moved from here? (CODE A 4)

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2.4 On what date did (NAME) move from this residence?

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2.5 When (NAME) left this residence, did he/she leave (A) alone, (W) with whole household,
or (P) with part of household?

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3 RESPONDENT'S PARTICULARS AND OTHER INTERVIEW DETAILS

3.1 RESPONDENT'S NAME.....

3.2 DOES RESPONDENT STAY IN THIS HOUSEHOLD (N=NO; Y=YES)

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3.3 RESPONDENTS ID OR LINE NUMBER

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3.4 What is your relationship to (NAME)? (CODE SHEET A²)

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3.5 RECORD COMMENTS ABOUT INTERVIEW OR CIRCUMSTANCES OF CHANGE OF RESIDENCE
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3.6 RECORD END TIME

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4 OFFICE/FIELD CHECKERS

4.1 FIELD SUPERVISOR/TEAM LEADER'S CODE

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4.2 DATA ENTRY CLERK'S CODE

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