



The Hashemite Kingdom Of Jordan
Department Of Statistics

**Arrivals and Departures Survey 2006/2007
(For Tourism Purposes)
Departures**

Form (2)

Important notice:

The required data are very confidential for purely statistical purposes, please don't mention names.

1. Departure Data			
101	Serial No		|_|_|_|_|
102	Respondent Sample No		|_|_|_|_|
103	Systematic Period		|_|_|
104	Point of entry		|_|_|
105	Point of exit		|_|_|
106	Date of arrival	...../...../ 200	|_|_| |_|_| |_|_|
107	Date of departure	...../...../ 200	|_|_| |_|_| |_|_|
2. Nationality & Residence			
201	Nationality		|_|_|_|
202	Place of usual residence..... <small>(last country of residence or intended for residence for twelve months or more excluding , non Jordanian people traveling for medical treatment , non Jordanian students, non Jordanian Diplomats and non Jordanian Military personnel irrespective of their residence period)</small>		|_|_|_|
203	Do you reside in Jordan?	3. No - proceed with interview 4. Yes - end interview (unless, non Jordanian people traveling for medical treatment non Jordanian student, non Jordanian Diplomat and non Jordanian Military Personnel)	|_|
204	What was the main purpose of your visit to Jordan?	a) International Visitor.....(proceed) 12. Vacation or Leisure 13. Visiting friends or relatives 14. Business tour 15. Conference or seminar 16. Medical treatment 17. Study 18. Religious visit 19. Crew members 20. Diplomat 21. Military personnel 22. Transit (at the Airport) 23. Transit (Border crossing) 24. Other (specify) .....	|_|_|
		b) Other type of traveler (end interview here) 5. Owns a business in Jordan 6. Immigrant 7. Border crossing worker 8. Other (specify).....	|_|

3. Travel Patterns				
301	How many times have you visited Jordan in the past 5 years)? (including this visit)	1. First time 2. Second time	3. Third time 4. More than 4 times	<input type="checkbox"/>
302	Are you traveling on a package tour?	3. yes	4. No	<input type="checkbox"/>
303	Who are you traveling with?	1. Alone 2. With spouse or partner 3. With spouse and children 4. With children	5. With business colleagues 6. With other relatives 7. Others (specify).....	<input type="checkbox"/>
304	Which type of transport did you travel in? (at departure)	6. Air 7. Sea 8. Bus	9. Car 10. Other(specify).....	<input type="checkbox"/>
305	If traveling by air, which air-carrier did you fly on?	1. Carrier when arriving.....		<input type="checkbox"/>
		2. Carrier when departing.....		<input type="checkbox"/>
306	If traveling by other transport means, was it Jordanian?	1. When Arriving	1. Yes 2. No	<input type="checkbox"/>
		2. When Departing	1. Yes 2. No	<input type="checkbox"/>
307	Which was the most attracted site you have visited during your stay in Jordan?	1. Petra 2. Aqaba 3. Jerash 4. Madaba 5. Ajlun 6. Wadi Rum	7. Al Karak 8. Mount Nebo 9. Dead Sea 10. Bethany Baptism Site 11. Other (specify)..... 12. Have not visited any site	<input type="checkbox"/>
4. Expenditure Patterns				
401	How many nights did you spend in Jordan?			<input type="checkbox"/>
402	Which type of accommodation did you mostly stay at when in Jordan?	1. Hotel 2. Suite and apartment hotel 3. Private apartment 4. Stayed with friends or relatives	5. Own house or apartment 6. Means of transport 7. Other (specify)..... 8. Have not stayed for an overnight	<input type="checkbox"/>
403	Who made arrangements for the main trip?	6. Travel agency or tour operator (continue) 7. Own arrangement 8. Employer 9. Conference organizer 10. Association	} Go to 406	<input type="checkbox"/>
404	Amount paid in your country	Total amount in currency		<input type="checkbox"/>
		JD	US\$ Euro Other (specify)	
405	What does the amount paid in your country include?	A. Tickets 1. one way 2. two way		<input type="checkbox"/>
		B. Accommodation		<input type="checkbox"/>

		3. full board 4. Half board	5. B.B. 4. Only Bed			
406	What was your estimated expenditure in Jordan on this trip including transport?	Total amount in currency			|_|_|_|_|_|_|_| |_|	
		JD	US \$	Euro		Other (specify)....
407	In which areas did you spend your money? (Please specify the amount of expenditure on each of the following)	Expenditure	Amount	%	|_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_| |_|_|_|_|_|_|_|	
		10. Jordanian international transport				
		11. Non Jordanian international transport				
		12. Accommodation				
		13. Food & Beverages				
		14. Entertainment				
		15. Medical treatment				
		16. Study				
		17. Local transport				
		18. Shopping				
		19. Other (specify)				
Total						
408	How many persons were included in the above expenditure?				|_|_|	
409	What was the main source of funds for your trip?	1. Self 2. Financed by employer	3. Financed by government 4. Other (specify).....	|_|		
5. Tourism Motivation						
501	Does the program of this tour include visiting other countries except Jordan ?	1. Yes (specify)..... 2. No			|_| |_|_|_|	
502	What is the <u>main factor</u> that influenced you to choose Jordan as a destination on this trip?	1. Recommendation of travel agent 2. Promotion by airline 3. Advertisement on TV 4. Advertisement by Magazine or news papers 5. Web sites on Jordan 6. Recommendation by friends/relatives 7. Other (specify).....			|_|	
503	How would you describe your overall reaction to this trip?	1. It was thoroughly enjoyable 2. It was enjoyable but not outstanding 3. It was somewhat disappointing 4. It was very disappointing			|_|	
504	Would you like to come again to Jordan?	1. Yes 2. No 3. Undecided			|_|	
505	Would you recommend Jordan as a holiday destination to your friends, relatives or others?	1. Yes 2. No 3. Do not know			|_|	
6. Respondent Data						
601	Which gender are you ?	1. Male 2. Female			|_|	
602	What is your age?	1. (0 - 14) 2. (15-24) 3. (25-44) 4. (45-64) 5. (More than 65)			|_|	
603	What is your occupation?				|_|	
Official Use Only						
Activity		Date		Officials Name	Signature	
Survey Conducted	/...../ 200				

Field Control	...../...../ 200		
Instrument Control	...../...../ 200		
Coding Conducted	...../...../ 200		
Data Input	...../...../ 200		
Data Verification	...../...../ 200		



**Arrivals and Departures Survey 2006/2007
(For Tourism Purposes)
Departures (Transit Visitor)**

Form (3)

Important notice:

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1. Departure Data					
101	Serial No			_ _ _ _	
102	Respondent Sample No			_ _ _ _	
103	Systematic Period			_ _	
104	Point of entry			|_|_|	
105	Point of exit			|_|_|	
106	Date of arrival	...../...../ 200		|_|_|_|_|_|_|_|	
107	Date of departure	...../...../ 200		|_|_|_|_|_|_|_|	
108	Hour of entry			|_|_|	
109	Hour of exit			|_|_|	
110	Total of hours			|_|_|	
2. Nationality & Residence					
201	Nationality			|_|_|_|_|	
202	Place of usual residence..... <small>(last country of residence or intended for residence for twelve months or more excluding , non Jordanian people traveling for medical treatment , non Jordanian students, non Jordanian Diplomats and non Jordanian Military personnel irrespective of their residence period)</small>			|_|_|_|_|	
203	Do you reside in Jordan?	5. No - proceed with interview 6. Yes - end interview (unless, non Jordanian people traveling for medical treatment non Jordanian student, non Jordanian Diplomat and non Jordanian Military Personnel)		|_|	
3. Travel Patterns					
301	Who are you traveling with?	8. Alone 9. With spouse or partner 10. With spouse and children 11. With children 12. With business colleagues 13. With other relatives 14. Others (specify).....		|_|	
302	Which type of transport did you travel in? (at departure)	11. Air 12. Sea 13. Bus 14. Car 15. Other(specify).....		|_|	
303	If traveling by air, which air-carrier did you fly on?	1. Carrier when arriving.....		|_|_|	
		2. Carrier when departing.....		|_|_|	
304	If traveling by other transport means, was it Jordanian?	1. When Arriving 1. Yes 2. No		|_|	
		2. When Departing 1. Yes 2. No		|_|	
4. Expenditure Patterns					
401	What was your estimated expenditure in Jordan on this	Total amount in currency			|_|_|_|_|_|_|_|
		JD	US \$	Euro		Other (specify)....

	trip including transport?				
402	In which areas did you spend your money? (Please specify the amount of expenditure on each of the following)	Expenditure		Amount	%
		20. Jordanian international transport			|_|_|_|_|_|_|_|
		21. Non Jordanian international transport			|_|_|_|_|_|_|_|
		22. Accommodation			|_|_|_|_|_|_|_|
		23. Food & Beverages			|_|_|_|_|_|_|_|
		24. Medical treatment			|_|_|_|_|_|_|_|
		25. Local transport			|_|_|_|_|_|_|_|
		26. Shopping			|_|_|_|_|_|_|_|
		27. Other (specify)			|_|_|_|_|_|_|_|
	Total			|_|_|_|_|_|_|_|	
403	How many persons were included in the above expenditure?				|_|_|
5. Respondent Data					
501	Which gender are you ?	1. Male 2. Female			|_|
502	What is your age?	1. (0 - 14) 2. (15-24) 3. (25-44) 4. (45-64) 5. (More than 65)			|_|
503	What is your occupation?				|_|
Official Use Only					
	Activity	Date	Officials Name		Signature
	Survey Conducted	...../...../ 200			
	Field Control	...../...../ 200			
	Instrument Control	...../...../ 200			
	Coding Conducted	...../...../ 200			
	Data Input	...../...../ 200			
	Data Verification	...../...../ 200			