FORM PC2
NATIONAL POPULATION CENSUS - KINGDOM OF TONGA - 1986

A. HOUSEHOLD SCHEDULE

Enumerators Name: ________________________________

CENSUS DISTRICT NO. ____________________________ VILLAGE NAME ____________________________

CENSUS BLOCK NO. ____________________________ HOUSEHOLD NUMBER: ____________

LIST ALL PERSONS PRESENT IN HOUSEHOLD ON 25 NOV - 25 NOV MIDNIGHT:

1. HEAD NAME M or F NAME M or F

2. 11. ____________________________ ____________________________

3. 12. ____________________________ ____________________________

4. 13. ____________________________ ____________________________

5. 14. ____________________________ ____________________________

6. 15. ____________________________ ____________________________

7. 16. ____________________________ ____________________________

8. 17. ____________________________ ____________________________

9. 18. ____________________________ ____________________________

10. 19. ____________________________ ____________________________

11. 20. ____________________________ ____________________________

TOTAL M F Persons

Attach all Individual Schedules, in numerical order to this Household Schedule:

B. HOUSEHOLD CHARACTERISTICS: Answer the following questions for the household as a whole:

1. Source of Water:

   1. Piped Supply
   2. Own Tank
   3. Own Well
   4. Other

2. Type of Latrine:

   1. Flush toilet
   2. Manual flush
   3. Pit
   4. Other type
   5. None

3. Type of Building:

   (Main house if more than one building for Household)

   1. Tongan style, Iron roof, wooden walls
   2. Tongan style, Thatch roof, wooden walls
   3. Tongan style, Thatch roof, thatch walls
   4. European style, Brick/cement
   5. European style, Wooden
   6. Other

   1. Electricity Supply
   2. Electric Generator
   3. Kerosene
   4. Benzin
   5. Solar
   6. Other

4. Source of Energy for Lighting:

   1. Electricity Supply
   2. Electric Generator
   3. Kerosene
   4. Benzin
   5. Solar

5. Source of Energy for Cooking:

   1. Electricity Supply
   2. Gas
   3. Firewood
   4. Kerosene
   5. Other

6. Tick if Household has:

   1. Radio
   2. Bicycle
   3. Boat
   4. Hot water system
   5. Bath and/or shower
   6. Motor cycle
   7. Truck
   8. Car
   9. Refrigerator
   10. TV
   11. Video Tape Recorder
   12. Washing Machine

7. Tenure of House:

   1. Own house
   2. Rent
   3. Rent-Free
   4. Other

1986 POPULATION CENSUS

This is to certify that Household NO. _______ headed by Mr/Mrs ____________________________
in CB No. _______ in the village of ____________________________ has been enumerated
on _______ November 1986.

______________________________________________________________________________
ENumerator
**PERSONAL SCHEDULE**

**CENSUS DISTRICT NUMBER - CD NO.**

**VILLAGE NAME:**

**CENSUS BLOCK NUMBER - CB NO.**

**HOUSHELDB NUMBER - HH NO.**

**PERSON NUMBER:**

1. **FULL NAME:**

2. **RELATIONSHIP TO HEAD OF HOUSEHOLD**

3. **SEX**  
   M  F

4. **DATE OF BIRTH**  
   Day  Mth  Year

5. **PLACE OF BIRTH**  
   (If born in hospital, state village where mother lived at time of birth, if born outside Tonga state country only).

6. **ETHNIC ORIGIN**  
   Tongan, Part-Tongan, European, Samoan, Fijian, Fiji Indian etc.

7. **MARITAL STATUS**  
   1) Never Married  
   2) Married  
   3) Widowed  
   4) Divorced or Separated

8. **What is this person's Religion?**

9. **Is this the usual PLACE OF RESIDENCE for this person?**  
   Y  N  
   If NO, give usual place. (Village or Country)

10. **How long has this person lived in this place?**  
    Years  Mths

11. **Where was this person living at the time of Hurricane Isaac? (3rd March 1982)**  
    (Village or Country)

12. **Where was this person at the time of the previous Census (30th Nov. 1975)?**  
    (Village or Country)

13. **What countries has this person lived in (6 mths or more)?**  
    (Tonga only, NZ, Hawaii, US Mainland, Am Samoa etc.)

14. **SCHOOL ATTENDANCE**  
   1) Too Young  
   2) At School  
   3) Left School  
   4) Never at School

15. **EDUCATIONAL ATTAINMENT**  
    Highest level reached.

16. **PERSONS WITH POST-SECONDARY QUALIFICATIONS, specify with level and field.**

---

**DID THE PERSON NAMED ON THIS FORM GIVE HIS/HER OWN ANSWERS TO THE QUESTIONS OR WERE THEY GIVEN BY ANOTHER PERSON IN THE HOUSEHOLD?**

**IF GIVEN BY ANOTHER PERSON GIVE PHAT PERSON'S NUMBER.**