

1

IDENTIFYING NUMBER →

NAME OF INDIVIDUAL →

Surname First Name Middle Name

IDENTIFICATION CHARACTERISTICS	ALL PERSONS	3	HOUSEHOLD NUMBER	9	0	1	2	3	4	5	6	7	8	9	23	WORKED	SEEKING FIRST JOB	OTHERS SEEKING WORK	WANTED WORK AND AVAILABLE	HOME DUTIES	STUDENT	RETIRED	DISABLED	OTHER	NOT STATED								
		4	INDIVIDUAL NUMBER WITHIN HOUSEHOLD	4	0	1	2	3	4	5	6	7	8	9	24	GOVT	PRIV ENTER	PRIV H HOLD	LIMPAD WORKER	HAS OWN BUSINESS/FARM	W/OUT PAID HELP	DID NO WORK	NOT STATED	25	0	1	2	3	4	5	6	7	8
	ALL PERSONS	5	RELATIONSHIP TO HEAD OF HOUSEHOLD	5	HEAD	SPOUSE/PARTNER	CHILD OF HO/SP	OTHER REL	BOARDER/REL	DOMESTIC EMP/LREL	OTHER	NOT STATED	26	0	1	2	3	4	5	6	7	8	9										
		6	SEX	6	MALE	FEMALE	NOT STATED	27	0	1	2	3	4	5	6	7	8	9															
		7	AGE (IN COMPLETED YEARS)	7	0	1	2	3	4	5	6	7	8	9	28	0	1	2	3	4	5	6	7	8	9								
		8	MARITAL STATUS (14 YEARS AND OVER)	8	NEVER MARRIED	MARRIED	WIDOWED	DIVORCED	LEGALLY SEP	NOT STATED	29	0	1	2	3	4	5	6	7	8	9												
	ALL PERSONS	9	(a) LOCAL OR FOREIGN	9(a)	THIS HOUSEHOLD	ELSEWHERE IN COUNTRY	ABROAD	NOT STATED	30	0	1	2	3	4	5	6	7	8	9														
			(b) PARISH IN BERMUDA	9(b)	ST GEO	TOWN	HAM	SMITHS	DEV	NOT STATED	31	0	1	2	3	4	5	6	7	8	9												
		(c) FOREIGN COUNTRY	9(c)	U K	AZ/POR	U.S.A.	CANADA	FRANCE	GERM	OTHER CARIB	OTHER COUNT	NOT STATED	32	0	1	2	3	4	5	6	7	8	9										
		10	(a) PARISH IN BERMUDA	10(a)	ST GEO	TOWN	HAM	SMITHS	DEV	NOT STATED	33(a)	0	1	2	3	4	5	6	7	8	9												
(b) FOREIGN COUNTRY	10(b)		U K	CANADA	AZ/POR	U.S.A.	FRANCE	GERM	CUBA	ITALY	OTHER EUR	NOT STATED	33(b)	0	1	2	3	4	5	6	7	8	9										
11	RACE	11	NEGRO/BLACK	WHITE	OTHER RACES	NOT STATED	34	0	1	2	3	4	5	6	7	8	9																
	12	RELIGION	12	ANGL	BAPTIST	HINDU	CHURCH OF GOD	METHODIST	MORAVN	PENT	PRESBY/CONGR	ROMAN CATH	SEV DAY ADVST	JEH WIT	BRETH	SAL ARMY	A.M.E (ZION)	MUSLIM	MEMNONITE	OTHER	NONE	NOT STATED											
SEC. 3	ALL PERSONS	13	NUMBER OF YEARS LIVED IN THIS PARISH	13	0	1	2	3	4	5	6	7	8	9	35	MARRIED	COMMON LAW	VISITING	NO LONGER LIVING WITH HUSBAND	NO LONGER LIVING WITH CL PARTNER	NEVER HAD HUSB OR CL PARTNER	NOT STATED	36	0	1	2	3	4	5	6	7	8	9
		14	PARISH LAST LIVED IN	14	ST GEO	TOWN	HAM	SMITHS	DEV	NOT STATED	37	0	1	2	3	4	5	6	7	8	9												
		15	NUMBER OF PARISHES EVER LIVED IN	15	1	2	3	4	5	6	7	8	9 OR MORE	38	0	1	2	3	4	5	6	7	8	9									
SEC. 4	ALL AGES	16	WHEN DID YOU COME TO BERMUDA TO STAY	16	BEFORE 1960	1960-1969	1970-1979	1980-1989	1990-1999	2000-2009	2010-2019	2020-2029	30 OR MORE	39	0	1	2	3	4	5	6	7	8	9									
		17	TYPE OF SCHOOL OR UNIVERSITY NOW BEING ATTENDED	17	NONE	NRVY/INFANT	PRI MARY	SECOND OR COMP	MULTI HIGH	OTHER SECOND	UNIV	OTHER	NOT STATED	40	0	1	2	3	4	5	6	7	8	9									
		18	ATTENDANCE AT SCHOOL OR UNIVERSITY	18	FULL TIME STUDENT	PART TIME STUDENT	NOT APPLICABLE	NOT STATED	41	0	1	2	3	4	5	6	7	8	9														
		19	HIGHEST LEVEL OF EDUCATIONAL ATTAINMENT (INCLUDING PERSONS STILL AT SCHOOL)	19	(a) TYPE OF SCHOOL/UNIVERSITY	19(a)	NONE	NRVY/INFANT	PRI MARY	SECOND OR COMP	MULTI HIGH	OTHER SECOND	UNIV	OTHER	NOT STATED	42	0	1	2	3	4	5	6	7	8	9							
SEC. 5	ALL PERSONS 16 YEARS AND OVER	20	OCUPATION FOR WHICH TRAINED OR BEING TRAINED (WRITE)	20	0	1	2	3	4	5	6	7	8	9	43	0	1	2	3	4	5	6	7	8	9								
			(FOR OFFICE USE ONLY)	20	0	1	2	3	4	5	6	7	8	9	44(a)	0	1	2	3	4	5	6	7	8	9								
		21	METHOD BY WHICH VOCATIONAL TRAINING ACQUIRED	21	ON JOB	AGRI COLL	TEACH TRAIN COLL	TECH SCH	OTHER INST TRAIN	PRIV STUDY	HOTEL	OTHER	NOT STATED	44(b)	0	1	2	3	4	5	6	7	8	9									
		22	PERIOD OF TRAINING (FOR PERSONS WHOSE TRAINING HAS BEEN COMPLETED)	22	UNDER 1/2 YEAR	1/2-1 YEARS	1-2 YEARS	2-3 YEARS	3-4 YEARS	4-5 YEARS	6 YEARS & OVER	NOT STATED	45	0	1	2	3	4	5	6	7	8	9										

COMMONWEALTH CARIBBEAN POPULATION CENSUS - BERMUDA MAY 12, 1980

FORM CI CONFIDENTIAL

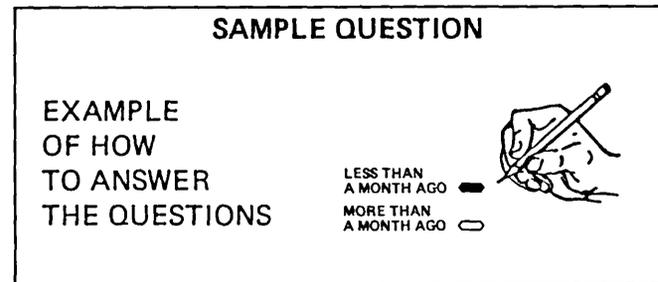
ECONOMIC ACTIVITY FERTILITY HOUSING CHECK RENTAL

SEC. 6 ALL PERSONS 16 YEARS AND OVER P A S T Y E A R P W E E K	23	MAIN ACTIVITY DURING PAST 12 MONTHS	
	24	WORKER OR OCCUPATIONAL STATUS IN WEEK PRECEDING ENUMERATION	
	25	MONTHS WORKED DURING PAST 12 MONTHS	
	26	MAIN TYPE OF JOB OR OCCUPATION IN WEEK PRECEDING ENUMERATION (WRITE AS GIVEN)	
		(FOR OFFICE USE ONLY)	
	27	INDUSTRY OR TYPE OF BUSINESS IN WEEK PRECEDING ENUMERATION (WRITE AS GIVEN)	
	(FOR OFFICE USE ONLY)		
28	ECONOMIC SITUATION DURING PAST WEEK		
29	TOTAL NUMBER OF HOURS WORKED (INCLUDING OVERTIME) DURING PAST WEEK		
SEC. 7 FEMALES 15 YEARS AND OVER NOT ATTENDING SCHOOL FULL TIME	30	NUMBER OF LIVEBORN CHILDREN EVER HAD	
	31	AGE OF MOTHER AT BIRTH OF FIRST LIVEBORN CHILD	
	32	AGE OF MOTHER AT BIRTH OF LAST LIVEBORN CHILD	
	33	NUMBER OF LIVE BIRTHS/STILLBIRTHS DURING PAST 12 MONTHS	
	34	UNION STATUS-AT PRESENT OR AT AGE 45	
	35	DURATION OF UNION (COMPLETED YEARS)	
	43	BERMUDA STATUS	
SEC. 8 THE HEAD OF THE HOUSEHOLD ONLY	36	TYPE OF DWELLING	
	37	TYPE OF TENURE	
	38	WATER SUPPLY	
	39	TOILET FACILITIES	
	40	YEAR WHEN DWELLING BUILT	
	41	MATERIAL OF OUTER WALLS	
42	NUMBER OF ROOMS		
SEC. 9 ALL PERSONS	44	WHERE DID INDIVIDUAL SPEND CENSUS NIGHT	(a) LOCALLY OR ABROAD (b) PARISH IN BERMUDA
		(FOR OFFICE USE ONLY)	
	46	PERIOD OF RENTAL	AMOUNT (\$)
SEC. 10 HEAD OF HOUSEHOLD	46	TOTAL RENT	AMOUNT (\$)

Surname	First Name	Middle Name	
23	WORKED <input type="checkbox"/> SEEKING FIRST JOB <input type="checkbox"/> OTHERS SEEKING WORK <input type="checkbox"/> WANTED WORK AND AVAILABLE <input type="checkbox"/> HOME DUTIES <input type="checkbox"/> STUDENT <input type="checkbox"/> RETIRED <input type="checkbox"/> DISABLED <input type="checkbox"/> OTHER <input type="checkbox"/> NOT STATED <input type="checkbox"/>	WORKED FOR OTHERS <input type="checkbox"/> HAS OWN BUSINESS/FARM <input type="checkbox"/> GOVT. <input type="checkbox"/> PRIV. ENTER <input type="checkbox"/> UNPAID WORKER <input type="checkbox"/> WITH PAID HELP <input type="checkbox"/> W/OUT PAID HELP <input type="checkbox"/> DID NO WORK <input type="checkbox"/> NOT STATED <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2-3 <input type="checkbox"/> 4-5 <input type="checkbox"/> 6-7 <input type="checkbox"/> 8-9 <input type="checkbox"/> 10-11 <input type="checkbox"/> 12 <input type="checkbox"/> NOT STATED <input type="checkbox"/>
27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	WORKED <input type="checkbox"/> WITH JOB NOT WKG <input type="checkbox"/> LOOKED FOR WK <input type="checkbox"/> HOME DUTIES <input type="checkbox"/> STUDENT <input type="checkbox"/> RETIRED <input type="checkbox"/> DISABLED <input type="checkbox"/> OTHER <input type="checkbox"/> NOT STATED <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
30	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
31	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
32	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
33(a)	LIVEBIRTHS <input type="checkbox"/> TW <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	NOT STATED <input type="checkbox"/>	(b) STILLBIRTHS <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
34	MARRIED <input type="checkbox"/> COMMON LAW <input type="checkbox"/> VISITING <input type="checkbox"/> NO LONGER LIVING WITH HUSBAND <input type="checkbox"/>	NO LONGER LIVING WITH HUSBAND <input type="checkbox"/>	NO LONGER LIVING WITH C.L. PARTNER <input type="checkbox"/> NEVER HAD HUSB OR C.L. PARTNER <input type="checkbox"/> NOT STATED <input type="checkbox"/>
36	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
36	ONE UNIT <input type="checkbox"/> TWO UNITS <input type="checkbox"/> THREE UNITS <input type="checkbox"/> FOUR TO SIX <input type="checkbox"/> SEVEN OR MORE <input type="checkbox"/> GROUP DWELLING <input type="checkbox"/> GUEST HOUSE <input type="checkbox"/> RES. CLUB <input type="checkbox"/> HOTEL <input type="checkbox"/> NOT STATED <input type="checkbox"/>	OWNED <input type="checkbox"/> LEASED FUR <input type="checkbox"/> LEAS UNFUR <input type="checkbox"/> RENT FUR <input type="checkbox"/> RENTED UNFUR <input type="checkbox"/> RENT FREE <input type="checkbox"/> OTHER <input type="checkbox"/> NOT STATED <input type="checkbox"/>	TANK PIPED INDOORS <input type="checkbox"/> TANK PIPED OUTDOORS <input type="checkbox"/> TANK DIPPED <input type="checkbox"/> MAINS SUPPLY FRESH <input type="checkbox"/> T P I MAINS SUR BR. & WELL <input type="checkbox"/> T P I & SEA WATER <input type="checkbox"/> OTHER <input type="checkbox"/> NONE <input type="checkbox"/> NOT STATED <input type="checkbox"/>
39(a)	SHARED <input type="checkbox"/> NOT SHARED <input type="checkbox"/> NONE <input type="checkbox"/>	PIT <input type="checkbox"/> W C LINKED TO SEWER <input type="checkbox"/> W C NOT LINKED TO SEWER <input type="checkbox"/> OTHER <input type="checkbox"/>	1980 <input type="checkbox"/> 1979 <input type="checkbox"/> 1978 <input type="checkbox"/> 1970-77 <input type="checkbox"/> 1961-89 <input type="checkbox"/> 1960 OR EARLIER <input type="checkbox"/> NOT STATED <input type="checkbox"/>
41	BDA STONE <input type="checkbox"/> CEMENT BLOCK <input type="checkbox"/> WOOD <input type="checkbox"/> WOOD & BDA ST. <input type="checkbox"/> WOOD & CEM BL <input type="checkbox"/> WOOD & METAL <input type="checkbox"/> BDA ST. CEM. BL <input type="checkbox"/> OTHER <input type="checkbox"/> NOT STATED <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	7 AND OVER <input type="checkbox"/> NOT STATED <input type="checkbox"/>
43	BY BIRTH <input type="checkbox"/> BY MARRIAGE <input type="checkbox"/> BY RESIDENCE <input type="checkbox"/> NONE <input type="checkbox"/> NOT STATED <input type="checkbox"/>	THIS HOUSEHOLD <input type="checkbox"/> ELSEWHERE IN COUNTRY <input type="checkbox"/> ABROAD <input type="checkbox"/>	ST. GEO <input type="checkbox"/> TOWN <input type="checkbox"/> HAM <input type="checkbox"/> SMITHS <input type="checkbox"/> DEV. <input type="checkbox"/> NOT STATED <input type="checkbox"/>
44(b)	PEM <input type="checkbox"/> CITY <input type="checkbox"/> PAGET <input type="checkbox"/> WAR <input type="checkbox"/> SOUTH <input type="checkbox"/> SAND <input type="checkbox"/>	WEEK <input type="checkbox"/> FORTNIGHT <input type="checkbox"/> MONTH <input type="checkbox"/> QUARTER <input type="checkbox"/> YEAR <input type="checkbox"/> NOT STATED <input type="checkbox"/>	0 <input type="checkbox"/> 100 <input type="checkbox"/> 200 <input type="checkbox"/> 300 <input type="checkbox"/> 400 <input type="checkbox"/> 500 <input type="checkbox"/> 600 <input type="checkbox"/> 700 <input type="checkbox"/> 800 <input type="checkbox"/> 900 <input type="checkbox"/>
46(b)	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	0 <input type="checkbox"/> 100 <input type="checkbox"/> 200 <input type="checkbox"/> 300 <input type="checkbox"/> 400 <input type="checkbox"/> 500 <input type="checkbox"/> 600 <input type="checkbox"/> 700 <input type="checkbox"/> 800 <input type="checkbox"/> 900 <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>

INSTRUCTIONS

1. Please use the #2 black-lead pencil supplied when marking your answers to the questions on this form. DO NOT USE INK, BALLPOINT PEN, OR COLORED PENCIL. If you make a mistake, erase cleanly and then fill in the answer space you want. Be sure to fill a response position () for each question where the question applies to the individual. Each answer space you mark should be filled in completely with a black mark, the same as shown in the SAMPLE QUESTION.



MAKE NO EXTRANEIOUS MARKS OF ANY KIND ON THE FORM

2. Do not mark or write in the shaded areas. The areas will be marked in the central office.
 3. When you have finished questions 1 through 22, carefully fold at perforation and continue with questions 23 through 46.
 4. Try to make your marks as shown here:
 - An ideal mark
 - A readable mark
- Do not make them
- too light Too light or poorly erased
 - too short Mark too short
 - too long Mark too long
 - or too thin Too thin to read

