

FORM **D-21 PR**U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS**1990 MILITARY CENSUS REPORT
PUERTO RICO**

This is your official Census form. Your cooperation in carefully filling out the form will help make the census successful. If you do not know the exact answer to any question, please give your best estimate.

This census is authorized by Title 13, United States Code, and you are required by law to answer the questions to the best of your knowledge.

The same law protects the confidentiality of your answers. Census employees are subject to fine and/or imprisonment for any disclosure of your answers. The person on base collecting your information is sworn in as a census employee and is subject to these same penalties.

Thank you for your cooperation.

1. Please print your name —

Last name

First name

Middle initial

2a. What is the name of your unit?**b. What is the address where you usually stay at least 4 nights a week?**

Building or barracks number or identification (if applicable)

House number, street name, apartment number

City

County/Municipio/Foreign country

State or Puerto Rico

ZIP Code

Names of nearest intersecting streets or roads

c. Is the above address on a military installation or base?1 ☐ Yes — Give name2 ☐ No**d. Is the place where you usually stay family-type housing (house, apartment, etc.) or group quarters (barracks, BOQ, hospital, etc.) ?**1 ☐ Family-type housing — **How many persons, including yourself, were living at the above address on April 1, 1990?**

----- Persons — *Please complete questions 3 through 5 on page 2. Then return your form to the person in charge of distributing these reports.*

2 ☐ Group quarters — *Continue with question 3 and follow the instructions at the bottom of page 2.***FOR CENSUS USE**

DO	ID	ARA	Block	PN
Add Y N	DO	ID	ARA	Block PN

3. Sex — Mark (X) ONE box.

- 1 ☐ Male
2 ☐ Female

4. Age and year of birth

a. Age

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b. Year of birth

1			
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5. Marital status — Mark (X) ONE box.

- 1 ☐ Now married
2 ☐ Consensually married
3 ☐ Widowed
4 ☐ Divorced
5 ☐ Separated
6 ☐ Never married

• **What are the last 4 digits of your Social Security Number?**

X	X	X	—	X	X	—				
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If the last four digits are 8333 or more, please continue with question 6. Persons who continue with question 6 represent a sample randomly selected on the basis of these digits. If the digits are less than 8333, stop here and return the form.

6. Where were you born? Mark (X) the appropriate box and print name of municipio, State, or foreign country.

- 1 ☐ Puerto Rico — Print name of municipio ↘

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- 2 ☐ United States — Print name of U.S. State ↘

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- 3 ☐ Elsewhere — Print name of foreign country ↘

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7. Are you a CITIZEN of the United States?

- 1 ☐ Yes, born in Puerto Rico — Skip to 9
2 ☐ Yes, born in the United States, Guam, the U.S. Virgin Islands, or Northern Marianas
3 ☐ Yes, born abroad of American parent or parents
4 ☐ Yes, U.S. citizen by naturalization
5 ☐ No, not a citizen of the United States

8. When did you come to Puerto Rico to stay?

- | | |
|---|---|
| 0 <input type="checkbox"/> 1987 to 1990 | 5 <input type="checkbox"/> 1970 to 1974 |
| 1 <input type="checkbox"/> 1985 or 1986 | 6 <input type="checkbox"/> 1965 to 1969 |
| 2 <input type="checkbox"/> 1982 to 1984 | 7 <input type="checkbox"/> 1960 to 1964 |
| 3 <input type="checkbox"/> 1980 or 1981 | 8 <input type="checkbox"/> 1950 to 1959 |
| 4 <input type="checkbox"/> 1975 to 1979 | 9 <input type="checkbox"/> Before 1950 |

9. At any time since February 1, 1990, have you attended regular school or college? Include only schooling which leads to a high school diploma or a college degree.

- 1 ☐ No, have not attended since February 1
2 ☐ Yes, public school, public college
3 ☐ Yes, private school, private college

10. How much school have you COMPLETED?

Mark (X) ONE box for the highest level COMPLETED or degree RECEIVED. If currently enrolled, mark the previous grade attended or highest degree received.

- 8 ☐ Less than 9th grade
9 ☐ 9th grade
10 ☐ 10th grade
11 ☐ 11th grade
12 ☐ 12th grade, **NO DIPLOMA**
13 ☐ **HIGH SCHOOL GRADUATE** — high school DIPLOMA or the equivalent (for example: GED)
14 ☐ Some college but no degree
15 ☐ Associate degree in college — Occupational program
16 ☐ Associate degree in college — Academic program
17 ☐ Bachelor's degree (for example: BA, AB, BS)
18 ☐ Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
19 ☐ Professional school degree (for example: MD, DDS, DVM, LLB, JD)
20 ☐ Doctorate degree (for example: PhD, EdD)

11a. Where was your father born?

- 1 ☐ Puerto Rico
2 ☐ United States
3 ☐ Elsewhere — Print name of foreign country ↘

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b. Where was your mother born?

- 1 ☐ Puerto Rico
2 ☐ United States
3 ☐ Elsewhere — Print name of foreign country ↘

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12a. Did you live at the address reported in question 2b 5 years ago (on April 1, 1985)?

- 2 ☐ Yes — Skip to 13a
3 ☐ No



b. Where did you live 5 years ago (on April 1, 1985)?

- (1) Print Puerto Rico or the name of the U.S. State or foreign country ↘

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(If foreign country, print answer above and skip to 13a.)

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- (2) Print the name of the municipio in Puerto Rico or the name of the county in the U.S. ↘

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- (3) Print the name of the city, town, or village ↘

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13a. During the last 10 years, did you live in the United States at any time for a period of 6 or more consecutive months?

1 ☐ Yes

2 ☐ No — Skip to 14

b. How long did you live in the United States during the last period of 6 or more months?

1 ☐ 6 months to a year

4 ☐ 5 years

2 ☐ 1 to 2 years

5 ☐ 6 to 9 years

3 ☐ 3 to 4 years

6 ☐ 10 or more years

c. When did you come or return to Puerto Rico after that period in the U.S.?

1 ☐ 1990

4 ☐ 1987

7 ☐ 1984

2 ☐ 1989

5 ☐ 1986

8 ☐ 1983

3 ☐ 1988

6 ☐ 1985

9 ☐ 1980 to 1982

d. During the last period you lived in the United States for 6 or more months, what was your main activity?

1 ☐ In the U.S. Armed Forces

2 ☐ Working at a job or business (either full or part-time)

3 ☐ Attending school or college

4 ☐ Something else

14. Do you know how to read and write (in any language)?

1 ☐ Yes

2 ☐ No

15a. Can you speak Spanish?

1 ☐ Yes

2 ☐ No

b. Can you speak English? If "Yes," do you speak English easily or with difficulty?

1 ☐ Yes, easily

2 ☐ Yes, with difficulty

3 ☐ No

16.

17. If you are female —

How many babies have you ever had, not counting stillbirths? Do NOT count stepchildren or children you have adopted.

0 ☐ None

1 ☐ 1

4 ☐ 4

7 ☐ 7

10 ☐ 10

2 ☐ 2

5 ☐ 5

8 ☐ 8

11 ☐ 11

3 ☐ 3

6 ☐ 6

9 ☐ 9

12 ☐ 12 or more

18a.

18b. During which of the following periods have you served on active duty in the Armed Forces of the United States? Mark (X) a box for each period in which you served. If the only active duty was for training in the military Reserves or National Guard, mark (X) here —→ 0 ☐ AND skip to 21.

1 ☐ September 1980 or later

2 ☐ May 1975 to August 1980

3 ☐ Vietnam era (August 1964—April 1975)

4 ☐ February 1955—July 1964

5 ☐ Korean conflict (June 1950—January 1955)

6 ☐ World War II (September 1940—July 1947)

7 ☐ World War I (April 1917—November 1918)

8 ☐ Any other time

c. In total, how many years of active-duty military service have you had?

Years

19.

20.

21a. Have you completed the requirements for a vocational training program at a trade school, business school, hospital or some other kind of school for occupational training? Do NOT include academic college courses.

1 ☐ Yes

2 ☐ No — Skip to 22b

b. At which kind of school was the training received?

1 ☐ Business school, trade school or junior college

2 ☐ High school vocational program

3 ☐ Training program at place of work

4 ☐ Other school — Specify ↴

22a.

22b. How many hours did you work LAST WEEK (at all jobs)? Subtract any time off; add overtime or extra hours worked.

Hours OR 0 ☐ Did not work last week — Skip to 29

23a. At what location did you work LAST WEEK? If you worked at more than one location, print where you worked most last week.

- 1 ☐ In U.S. State or foreign country — Skip to 23d
2 ☐ In Puerto Rico — Continue with 23b

b. What is the name of the city, town, or village? ↘

c. What is the name of the municipio? ↘

Skip to 24a

d. What is the name of the U.S. State or foreign country? ↘

24a. How did you usually get to work LAST WEEK? If you usually used more than one method of transportation during the trip, mark (X) the box of the one used for most of the distance.

- | | |
|---|---|
| 1 <input type="checkbox"/> Car, truck, or van | 7 <input type="checkbox"/> Bicycle |
| 2 <input type="checkbox"/> Bus | 8 <input type="checkbox"/> Walked |
| 3 <input type="checkbox"/> Público | 9 <input type="checkbox"/> Worked at home |
| 4 <input type="checkbox"/> Ferryboat | 10 <input type="checkbox"/> Other method |
| 5 <input type="checkbox"/> Taxicab | |
| 6 <input type="checkbox"/> Motorcycle | |

If "car, truck, or van" is marked in 24a, go to 24b.
Otherwise, skip to 25a.

b. How many people, including yourself, usually rode to work in the car, truck or van LAST WEEK?

- | | |
|--|--|
| 1 <input type="checkbox"/> Drove alone | 5 <input type="checkbox"/> 5 people |
| 2 <input type="checkbox"/> 2 people | 6 <input type="checkbox"/> 6 people |
| 3 <input type="checkbox"/> 3 people | 7 <input type="checkbox"/> 7 to 9 people |
| 4 <input type="checkbox"/> 4 people | 8 <input type="checkbox"/> 10 or more people |

25a. What time did you usually leave home to go to work LAST WEEK? "Usually" means on most days last week.

- 1 ☐ a.m.
2 ☐ p.m.

b. How many minutes did it usually take you to get from home to work LAST WEEK?

Minutes — Skip to 29

26.

27.

28.

29. What is your branch of service?

- | | |
|---|---|
| 1 <input type="checkbox"/> Air Force | 4 <input type="checkbox"/> Navy |
| 2 <input type="checkbox"/> Army | 5 <input type="checkbox"/> Coast Guard |
| 3 <input type="checkbox"/> Marine Corps | 6 <input type="checkbox"/> Not in U.S. Armed Forces |

30. Occupation

a. What is your primary job specialty? If you have more than one specialty, list the one at which you spend the most time.

(1) Title ↘

(2) MOS/Rating/Designator/AFSC ↘

b. What kind of work are you doing?

(For example: aircraft engine mechanic, electronic technician, field artillery surveyor, sonar technician, tactical intelligence officer)

c. What are your most important activities or duties?

(For example: repair seaplanes, research on electronic components, survey artillery ranges, repair sonar equipment, edit intelligence manuals)

d. What is your paygrade? Enter two-character code.
(For example: E-4, O-3)

Paygrade

31.

32a. Last year (1989), did you work, even for a few days, at a paid job, business, farm or on active-duty military service?

- 1 ☐ Yes 2 ☐ No — Skip to 33

b. How many weeks did you work in 1989? Count paid vacation, paid sick leave, and military service.

Weeks

c. During the weeks WORKED in 1989, how many hours did you usually work each week?

Hours

33. Income in 1989 —

Mark (X) the "Yes" box below for each income source you received during 1989. Otherwise, mark (X) the "No" box.
If "Yes," enter the total amount received during 1989.
If exact amount is not known, please give best estimate.
If net income in 33b, c, or d was a loss, write "Loss" above the dollar amount.

a. Pay as a member of the ARMED FORCES including special, incentive, and bonus pay. Also wages, salaries, tips, and commissions from CIVILIAN JOBS — Report total amount from all jobs BEFORE DEDUCTIONS for taxes, bonds, dues, or other items.

1 ☐ Yes —→ \$.00
2 ☐ No Annual amount — Dollars

b. Self-employment income from own nonfarm business, including proprietorship and partnership — Report NET income after business expenses.

1 ☐ Yes —→ \$.00
2 ☐ No Annual amount — Dollars

c. Farm self-employment income — Report NET income after operating expenses. Include earnings as a tenant farmer or sharecropper.

1 ☐ Yes —→ \$.00
2 ☐ No Annual amount — Dollars

d. Interest, dividends, net rental income or royalty income, or income from estates and trusts — Report even small amounts credited to an account.

1 ☐ Yes —→ \$.00
2 ☐ No Annual amount — Dollars

e. Any other income received regularly, such as social security, public assistance or welfare payments, child support, or unemployment compensation — Do NOT include lump-sum payments such as money from an inheritance or the sale of a home.

1 ☐ Yes —→ \$.00
2 ☐ No Annual amount — Dollars

34. What was your total income in 1989?

Add entries in questions 33a through 33e; subtract any losses. If total amount was a loss, write "Loss" above amount.

\$.00
Annual amount — Dollars
OR 0 ☐ None

AFTER COMPLETING THIS FORM

1. Please check it to be sure you have answered all the required questions completely.
2. Then return your form to the person in charge of distributing these reports.
3. Military personnel living away from this installation, but within the census area, also will receive a census form at home. To ensure that such personnel are assigned to the correct jurisdiction, it is important that **YOU MAKE SURE YOU ARE INCLUDED ON BOTH FORMS** — this report and the census form sent to your home.

THANK YOU FOR YOUR COOPERATION.

The Census Bureau estimates that, on average, each respondent will take either 2 minutes (first five questions) or 7 minutes (all thirty-four questions) to complete this form, including the time for reviewing the instructions and answers. Comments about these estimates should be directed to the Associate Director for Management Services, Bureau of the Census, Washington, DC 20233, Attn: CEN-90 and to the Office of Management and Budget, Paperwork Reduction Project CEN-90, Washington, DC 20503.

CENSUS '90



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