



# 1991 Census Northern Ireland I form for making an individual return

Please complete this form and have it ready for collection on Monday 22nd April.

Completion of the form is compulsory under the Census Act (Northern Ireland) 1969. If you refuse to complete it, or give false information, you may have to pay a fine of up to £400.

There is no penalty for refusing to state religious denomination as this is a voluntary question.

**Your answers will be treated in strict confidence and used only to produce statistics.**

No names and addresses will be put into the computer; only the postcode will be entered. The forms will be kept securely and treated as **confidential**.

**No information about named individuals will be passed by the Census Office to any other Government Department or to any other authority or person.** Anyone using or disclosing Census information improperly will be liable to prosecution.

After completing the form, please sign the declaration on the last page.

Thank you for your co-operation.

R McMurray  
Registrar General

Enquiries to:-

**Census Office**  
Department of  
Health and Social Services  
Castle Buildings  
Stormont  
BELFAST BT4 3RA  
Telephone Belfast 763939

To be completed  
by the  
Enumerator

E.D. No.  
Form No.  
Format No.  
**9**  
Person No.

To be completed by the Manager, Commanding Officer,  
Chief Resident Officer, or other person in charge of the  
establishment or vessel.

Name of Establishment or Vessel  
Address  
Postcode

To be completed by or for the Individual

Please answer questions by ticking the appropriate box or boxes  where they are provided.  
Please use ink or ballpoint pen.

**1 Name**  
Please write in your name and surname (BLOCK CAPITALS).  
For a baby who has not yet been given a name, write BABY  
and the surname.

**2 Sex**  
Please tick the appropriate box.

**3 Date of birth**  
Please write in the day, month and year of birth.

**4 Marital status**  
On the 21st April what is your marital status?  
If separated but not divorced, please tick 'Married (first  
marriage)' or 'Re-married' as appropriate.  
Please tick one box.

**5 Position in establishment**  
Please write in your position in this establishment.  
For example, write 'Guest'; 'Patient'; 'Inmate'; 'Staff';  
'Student'; 'Boarder'.  
If you are completing the form in a private household, your  
relationship to the person making the return for the rest of the  
household should be stated.

**6 Whereabouts on night of 21-22 April 1991**

**7 Married, widowed, separated and divorced women**  
a - enter in Box 1 the total number of children born alive to  
you.  
b - enter in Box 2 how many of these children were born alive  
to you after 21st April 1990.

**8 Usual address**  
If you usually live here, please tick 'This address'.  
If not, tick 'Elsewhere' and write in your usual address.  
If you are a student or a schoolchild away from home during  
term time, your home address should be taken as your usual  
address.  
If you live away from home for part of the week, your home  
address should be taken as your usual address.

Name

Male  1  
Female  2

Day Month Year

Single (never married)  1  
Married (first marriage)  2  
Re-married  3  
Divorced (decree absolute)  4  
Widowed  5

Position in establishment

Not applicable to this form

a Number of children  1  
b Number of children  2

This address  1  
Elsewhere  2

If 'Elsewhere', please write your usual address and postcode below in BLOCK CAPITALS

Address

Postcode

Please turn over →

9 **Term time address of students and schoolchildren**

If not a student or schoolchild, please tick first box.

If you are a student or schoolchild and you live here during term time, tick 'This address'.

If you do not live here during term time, tick 'Elsewhere' and write in the current or most recent term time address.

- Not a student or schoolchild  1
- This address  2
- Elsewhere  3

If 'Elsewhere' please write your term time address and postcode below in BLOCK CAPITALS


Postcode 

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10 **Usual address one year ago**

If your usual address one year ago (on the 21st April 1990) was the same as your current usual address (given in answer to question 8), please tick 'Same'. If not, tick 'Different' and write in your usual address one year ago.

For a child born since the 21st April 1990, tick the 'Child under one' box.

- Same as Question 8  1
- Different  2
- Child under one  3

If 'Different', please write your address and postcode on the 21st April 1990 below in BLOCK CAPITALS


Postcode 

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11 **Country of birth**

Please tick the appropriate box.

- Northern Ireland  1
- England  2
- Scotland  3
- Wales  4
- Republic of Ireland  5
- Elsewhere  6

If 'Elsewhere', please write in the present name of the country

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12 **Religion**

Please state the Religion, Religious Denomination or Body to which you belong. The general term 'Protestant' should not be used alone and the denomination should be given as precisely as possible.

If none write NONE.

Religion

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13 **Long term illness**

Do you have any long term illness, health problem or handicap which limits your daily activities or the work you can do?

Include problems which are due to old age.

- Yes, I have a health problem which limits activities  1
- I have no such health problem  2

This question is for all persons aged 3 or over (born before 22 April 1988)

14 **Irish language**

Can you speak, read or write Irish? Please tick the appropriate box(es).

- Can speak Irish  1
- Can read Irish  2
- Can write Irish  4
- Do not know Irish  0

**Whether working, retired, looking after the home etc. last week**

Which of the following things were you doing **last week**?  
Please read carefully right through the list. If you did more than one of the things listed last week, **tick all the descriptions that apply.**

Casual or temporary work should be counted at boxes 1, 2, 3 or 4. Also tick boxes 1, 2, 3 or 4 if you had a job last week but were off sick, on holiday, temporarily laid off or on strike.

Working for an employer is **part time** if the hours worked, excluding any overtime and meal breaks, are usually 30 hours or less a week (box 2).

Unpaid work in a family business including a shop or farm.

Include for example ACE Scheme, Youth Training Programme and Job Training Programme.

Includes wanting a job but prevented by holiday or temporary sickness from looking for one.

Do not count training given or paid for by an employer.

Include voluntary work and any other activity.

- Was working for an employer full time  1  
(more than 30 hours a week)
- Was working for an employer part time  2  
(one hour or more a week)
- Was self-employed, employing other people  3
- Was self-employed, not employing other people  4
- Unpaid work  5
- Was on a government employment or training scheme  6
- Was waiting to start a job already accepted  7
- Was unemployed and looking for a job  8
- Was at school or in other full time education  9
- Was unable to work because of long term sickness or disability  10
- Was retired from paid work  11
- Was looking after the home or family  12
- Other  13  
*please specify*


Please read A below, tick the box that applies and follow the instruction by the box ticked.

This will tell you which questions to answer.

**A** Did you have a paid job last week or do unpaid work in a family business, including a shop or farm (any of boxes 1,2,3,4 or 5 ticked at question 15)?

Yes  If **yes** ticked, answer questions 16, 17, 18, 19 and 20 about the main job last week, then go on to question 21.

No  If **no** ticked, answer **B**.

**B** Have you had a paid job within the last 10 years?

Yes  If **yes** ticked, answer questions 16,17 and 18 about the most recent job, then go on to question 21.

No  If **no** ticked, go on to question 21.

**16 Hours worked a week**

How many hours a week do or did you usually work in your main job?

Do not count overtime or meal breaks.

Number of hours worked a week

**17 Occupation**

Please give the full title of your present or last job and describe the main things you do or did in the job.

At **a**, give the full title by which the job is known, for example: 'packing machinist'; 'poultry processor'; 'jig and tool fitter'; 'supervisor of typists'; 'accounts clerk'; rather than general titles like 'machinist'; 'process worker'; 'supervisor' or 'clerk'. Give rank or grade if you have one.

At **b**, write down the main things you actually do or did in the job.

**Armed Forces** - enter 'commissioned officer' or 'other rank' as appropriate at **a**, and leave **b** blank.

**Civil Servants** - give grade at **a**, and at **b** state discipline or specialism, for example: 'electrical engineer'; 'accountant'; 'chemist'; 'administrator'.

**Other Public Officials** - give rank or grade at **a** and description of duties at **b**.

**a** Full job title

**b** Main things done in job

Please turn over →

**18 Name and business of employer (if self-employed give the name and nature of business)**

At **a**, please give the name of your employer. Give the trading name if one is used. Do not use abbreviations.

At **b**, describe clearly what your employer (or yourself if self-employed) makes or does (or did).

**Armed Forces**—write 'Armed Forces' at **a** and leave **b** blank. For a member of the Armed Forces of a country other than the UK—add the name of the country.

**Civil Servants**—give name of Department at **a** and write 'Government Department' at **b**.

**Other Public Officials**—give name of employing authority at **a** and department in which employed at **b**.

a Name of employer


b Description of employer's business


**19 Address of place of work**

Please give the full address of your place of work. If employed on a site for a long period, give the address of the site.

If not working regularly at one place but reporting daily to a depot or other fixed address, give that address.

If not reporting daily to a fixed address, tick box 1.

If working mainly at home, tick box 2.

**Armed Forces**—leave blank.

Please write full address and postcode of workplace below in BLOCK CAPITALS


Postcode

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No fixed place  1

Mainly at home  2

**20 Daily journey to work**

Please tick the appropriate box to show how the longest part, by distance, of your daily journey to work is normally made.

If using different means of transport on different days, show the means most often used.

Car or van includes three-wheeled cars and motor caravans.

- Train  1
- Public service bus  2
- Employer's bus  3
- Motor cycle, scooter, moped  4
- Car or van-pool, sharing driving  5
- Driving a car or van  6
- Passenger in car or van  7
- Pedal cycle  8
- On foot  9
- Other  10

*please specify*

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Work mainly at home  11

**21 Academic, professional and vocational qualifications**

A. Please tick the appropriate boxes if you have obtained any of the qualifications listed aside.

- Degree level or higher  1
- BTEC (Higher), BEC (Higher), TEC (Higher), HNC, HND.  2
- GCE 'A' Level, Advanced Senior Certificate  3
- BTEC (National), TEC (National), BEC (National), ONC, OND.  4
- GCSE, GCE 'O' Level (including CSE Grade 1), Senior Certificate, BTEC (General), BEC (General)  5
- CSE (Other than Grade 1)  6
- No formal qualifications as above  7

B. Have you obtained professional or vocational qualifications such as nursing or teaching qualifications? If yes, please state qualifications held.


**Declaration**

This form is correctly completed to the best of my knowledge and belief.

Signature

Date

April 1991