



Tástáil Thrialach Daonáirimh

Census Pilot Survey

Sunday 25 April 2004

Central Statistics Office

Household Form

About the Census Pilot Survey

Since 1841, the Census has recorded a comprehensive picture of the social and living conditions of our people over time. The Census provides vital information necessary for planning Ireland's future.

In preparation for the next Census in 2006, the Central Statistics Office is conducting a Census Pilot Survey in your area. The pilot will test new questions. Testing is vital to ensure that Census 2006 will provide accurate and timely results.

Your help is essential to ensure the success of the survey. I would urge you, therefore, to complete this form on Sunday 25th April. If you have any questions about the Census, please ask your Enumerator.

The confidentiality of the information you provide is legally guaranteed by the Statistics Act, 1993. Information provided will be used for statistical purposes only.

Thank you for your co-operation.

Donal Garvey

Donal Garvey
Director General

Tá leagan Gaeilge den fhoirm seo le fáil ach í a iarraidh ón áiritheoir.

Who should complete the Census form?

The householder or any adult member of the household present on the night of Sunday 25 April 2004 should complete the form.

Each household should complete a separate Household Form.

A household is:

- one person living alone or
- a group of related/unrelated people living at the same address with common housekeeping arrangements, that is, sharing at least one meal a day or sharing a living room or sitting room.

Talk to your Census Enumerator if:

- there is more than one household at your address (*each will need their own Household Form*);
- there are more than 6 persons in the household (*you will need an Individual Form for each additional person*).

How to complete your Census form

1. The form should be completed on the night of Sunday 25 April.
2. Please answer questions about your accommodation on page 2.
3. Identify on page 3:
 - all persons (including visitors) who spent the night of Sunday 25 April in the household;
 - any household members who are normally resident in the household but who are temporarily away on the night of Sunday 25 April.
4. Answer the questions beginning on page 4 for all persons present on the night of Sunday 25 April.
5. Answer the questions on pages 22-23 in respect of any household members temporarily away on the night of Sunday 25 April.
6. Sign the declaration on the back page.

For office use only

House Number and Street/Townland Name

County Code	Enumeration Area Code	ED Code	Street/Townland Code	Building ID	D No.	Number of persons PRESENT			ABSENT persons	Received by mail
						Males	Females	Total		

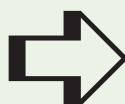
Please complete this form using a **BLACK or BLUE pen**.

Tick boxes like this: ☒

If you make a mistake:

- Fill in the box like this 1 ☐ Per week
 ✓ correct one like this 2 ☒ Per month

Where you are required to write in an answer please use **BLOCK CAPITAL LETTERS** and leave one space between each word. Continue on to a new line if a word will not fit, as in the example.



EXAMPLE

What is your place of birth?
 If elsewhere ABROAD, write in the COUNTRY.

NEW ZEALAND
 D

Questions about your accommodation

Tick boxes like this ☒

START HERE

H1 What type of accommodation does your household occupy?
 ✓ one box only.

A whole house or bungalow that is:

- 1 ☐ Detached
 2 ☐ Semi-detached
 3 ☐ Terraced (including end of terrace and duplex)

A flat or apartment that is self-contained:

- 4 ☐ In a purpose-built block
 5 ☐ Part of a converted house or commercial building

A bed-sit:

- 6 ☐ Bed-sit (with some shared facilities e.g. toilet)

A mobile or temporary structure:

- 7 ☐ A caravan or other mobile or temporary structure

H2 What year was your house or other building containing your accommodation first built?
 ✓ The year in which first built even if the building was subsequently converted, extended or renovated.

- 1 ☐ Before 1919
 2 ☐ 1919 – 1940 inclusive
 3 ☐ 1941 – 1960 inclusive
 4 ☐ 1961 – 1970 inclusive
 5 ☐ 1971 – 1980 inclusive
 6 ☐ 1981 – 1990 inclusive
 7 ☐ 1991 – 1995 inclusive
 8 ☐ 1996 – 2000 inclusive
 9 ☐ 2001 or later

H3 What is the nature of occupancy of your household's accommodation?
 ✓ one box only.

- 1 ☐ Owner occupied where loan or mortgage repayments are being made
 2 ☐ Owner occupied where no loan or mortgage repayments are being made
 3 ☐ Being purchased from a Local Authority under a Tenant Purchase Scheme
 4 ☐ Rented from a Local Authority
 5 ☐ Rented from a Voluntary Body
 6 ☐ Rented unfurnished other than from a Local Authority or Voluntary Body
 7 ☐ Rented furnished or part furnished other than from a Local Authority or Voluntary Body
 8 ☐ Occupied free of rent (caretaker, company official, etc.)

H4 If your accommodation is rented, how much rent does your household pay?

Enter amount to the nearest Euro.

€

✓ indicate.

- 1 ☐ Per week
 2 ☐ Per month
 3 ☐ Per year

H5 How many rooms do you have for use only by your household?

- Do NOT count bathrooms, toilets, kitchenettes, utility rooms, consulting rooms, offices, shops, halls or landings, or rooms that can only be used for storage such as cupboards.
- Do count all other rooms for example kitchens, living rooms, bedrooms, conservatories you can sit in, and studies.
- If two rooms have been converted into one, count them as one room.

Number of rooms

H6 Does your accommodation have central heating?

✓ 'Yes' if you have central heating in some or all rooms whether or not you use it.

- 1 ☐ Yes
 2 ☐ No

H7 What type of piped water supply does your accommodation have?
 ✓ one box only.

- 1 ☐ Connection to a Public Main
 2 ☐ Connection to a Group Water Scheme with a Local Authority source of supply
 3 ☐ Connection to a Group Water Scheme with a private source of supply (e.g. borehole, lake, etc.)
 4 ☐ Connection to other private source (e.g. well, lake, rain-water tank, etc.)
 5 ☐ No piped water supply

H8 What type of sewerage facility does your accommodation have?
 ✓ one box only.

- 1 ☐ Public sewerage scheme
 2 ☐ Individual septic tank
 3 ☐ Individual treatment system other than a septic tank
 4 ☐ Other sewerage facility
 5 ☐ No sewerage facility

H9 How many cars or vans are owned or are available for use by one or more members of your household?
 Include any company car or van if available for private use.
 ✓ one box only.

- 1 ☐ One
 2 ☐ Two
 3 ☐ Three
 4 ☐ Four or more
 5 ☐ None

H10 Does your household have a personal computer (PC)?

- 1 ☐ Yes
 2 ☐ No

H11 Does your household have access to the Internet?

✓ 'Yes' if you have access to the Internet in your home.

- 1 ☐ Yes, Broadband connection
 2 ☐ Yes, other connection
 3 ☐ No

H12 Proceed to next page



Persons present in the household on the night of Sunday 25 April

List every person who spent the night of Sunday 25 April 2004 in the household or who arrived the following morning not having been enumerated elsewhere.

INCLUDE

- all persons alive at midnight on Sunday 25 April 2004.
- persons staying temporarily in the household.

DO NOT INCLUDE

- babies born after midnight on Sunday 25 April 2004.
- anyone who is temporarily away from home on the night of Sunday 25 April 2004. However, these persons should be listed as being absent in List 2 below.
- students who are away from home on the night of Sunday 25 April 2004, should be listed as being absent in List 2 below.

LIST 1	Persons PRESENT in the household on the night of Sunday 25 April
Person No.	First name and surname
1	
2	
3	
4	
5	
6	
If there are more than 6 persons present in the household on the night of Sunday 25 April, you will need additional Forms. Please ask your Enumerator for an Individual Form for each additional person.	
7	
8	
9	
10	
11	
12	

Answer questions relating to each person present in the household on Sunday 25 April beginning on Page 4.

Answer questions relating to persons 7-12 on additional Individual Forms available from your Enumerator.

Persons temporarily away from the household on the night of Sunday 25 April

List any household members who usually live at this address but who were ABSENT on the night of Sunday 25 April. Include in particular students who are living away from home during term time who were not present on the night of Sunday 25 April.

LIST 2	Persons ABSENT from the household on the night of Sunday 25 April
Person No.	First name and surname
1	
2	
3	
4	
5	
6	
If there are more than 6 usual residents absent on the night of Sunday 25 April, you will need additional Forms. Please ask your Enumerator for guidance.	

You must answer questions beginning on Page 22 for each usual resident listed here as being absent from the household on the night of Sunday 25 April.

Please answer questions for each person present in the household on the night of Sunday 25 April in the same order as listed in List 1 above beginning on Page 4.

14 How do you usually travel to work, school or college?

✓ one box only, for the longest part, by distance, of your usual journey to work, school or college.

- 1 ☐ On foot
- 2 ☐ Bicycle
- 3 ☐ Bus, minibus or coach
- 4 ☐ Train or DART
- 5 ☐ Motor cycle or scooter
- 6 ☐ Driving a car
- 7 ☐ Passenger in a car
- 8 ☐ Lorry or van
- 9 ☐ Other means
- 10 ☐ Work mainly at or from home
- 11 ☐ Not applicable

15 What time do you usually leave home to go to work, school or college?

- 1 ☐ Before 06:30
- 2 ☐ 06:31–07:00
- 3 ☐ 07:01–07:30
- 4 ☐ 07:31–08:00
- 5 ☐ 08:01–08:30
- 6 ☐ 08:31–09:00
- 7 ☐ 09:01–09:30
- 8 ☐ after 9:30
- 9 ☐ Not applicable

16 What distance is your journey from home to work, school or college and how long does it usually take?

Write in distance to the nearest kilometre and journey time in minutes.

Note: 1 mile = 1.6km approx.

Kilometres	<input type="text"/>	<input type="text"/>	<input type="text"/>
Minutes	<input type="text"/>	<input type="text"/>	<input type="text"/>

17 If you are aged under 15, your questions are now finished. Go to questions for Person 2 on page 7.



18 Have you ceased your full-time education?

- 1 ☐ Yes
- 2 ☐ No

If 'YES', write in AGE at which it ceased.

<input type="text"/>	<input type="text"/>
----------------------	----------------------

19 What is the highest level of education (full-time or part-time) which you have completed to date?

✓ one box only.

- 1 ☐ No formal education
- 2 ☐ Primary education
- Second Level**
- 3 ☐ Lower secondary:
Junior/Intermediate/Group Certificate, 'O' Levels /GCSEs, NCVA Foundation Certificate, Basic Skills Training Certificate or equivalent
- 4 ☐ Upper secondary:
Leaving Certificate (including Applied and Vocational Programmes), 'A' Levels, NCVA Level 1 Certificate or equivalent
- 5 ☐ Technical or Vocational qualification:
Completed Apprenticeship, NCVA Level 2/3 Certificate, Teagasc Certificate/Diploma or equivalent
- 6 ☐ Both Upper secondary and Technical or Vocational qualification
- Third Level**
- 7 ☐ Non Degree:
National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma
- 8 ☐ Primary Degree (Third Level Bachelor Degree)
- 9 ☐ Professional qualification (of Degree status at least)
- 10 ☐ Both a Degree and a Professional qualification
- 11 ☐ Postgraduate Certificate or Diploma
- 12 ☐ Postgraduate Degree (Masters)
- 13 ☐ Doctorate (Ph.D)

20 Do you hold any THIRD LEVEL qualification(s) which you attained after completing 2 or more years of study?

- 1 ☐ Yes
- 2 ☐ No

If 'YES', please indicate the main subject area(s) in which the qualification(s) is held.

✓ ALL the boxes that apply.

- 1 ☐ Education
- 2 ☐ Humanities and Arts (including Foreign Languages, History, Philosophy, Fine Arts, Music and Performing Arts, Design)
- 3 ☐ Social Sciences/Business/Law (including Psychology, Economics, Journalism, Finance, Accounting)
- 4 ☐ Life Science, Physical Science, Mathematics and Statistics
- 5 ☐ Computing
- 6 ☐ Engineering, Manufacturing and Construction (including Architecture)
- 7 ☐ Agriculture and Veterinary (including Forestry, Fishery, Horticulture)
- 8 ☐ Health (including Medicine, Nursing, Dental studies, Therapy and Rehabilitation, Pharmacy)
- 9 ☐ Social Services (including Child care and Youth services, Social Work and Counselling)
- 10 ☐ Services (including Hotel, Catering, Sports, Transport, Environmental Protection, Security, Occupational Health and Safety, Military and Defence)

21 Do you regularly do any unpaid work looking after the home or family?

Examples include: looking after children, cooking, cleaning, gardening, repairs and shopping.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

22 Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?

Include problems which are due to old age.

Personal help includes help with basic tasks such as feeding or dressing.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

23 In the last 4 weeks have you done any of the following activities without pay?

✓ ALL the boxes that apply.

- 1 ☐ Helping or voluntary work with a social or charitable organisation
- 2 ☐ Helping or voluntary work with a religious group or church
- 3 ☐ Helping or voluntary work with a sporting organisation
- 4 ☐ Helping or voluntary work with a political or cultural organisation
- 5 ☐ Any other voluntary activity

24 How would you describe your present principal status?

✓ one box only.

- 1 ☐ Working for payment or profit
- 2 ☐ Looking for first regular job
- 3 ☐ Unemployed
- 4 ☐ Student or pupil
- 5 ☐ Looking after home/family
- 6 ☐ Retired from employment
- 7 ☐ Unable to work due to permanent sickness or disability
- 8 ☐ Other, write in

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[illegible]

Acres
 ☐ OR
 Hectares

[illegible][illegible]

2 ☐ No fixed place of work

[illegible]

Per year	or	Weekly equivalent (approx.)
Nil	1	Nil
Less than €6,000	2	Less than €120
€6,000 to €7,999	3	€121 to €154
€8,000 to €9,999	4	€155 to €190
€10,000 to €14,999	5	€191 to €290
€15,000 to €19,999	6	€291 to €385
€20,000 to €24,999	7	€386 to €480
€25,000 to €29,999	8	€481 to €580
€30,000 to €39,999	9	€581 to €770
€40,000 to €49,999	10	€771 to €960
€50,000 to €59,999	11	€961 to €1155
€60,000 and over	12	€1155 and over



- 14 How do you usually travel to work, school or college?**
☒ one box only, for the longest part, by distance, of your usual journey to work, school or college.

- 1 ☐ On foot
- 2 ☐ Bicycle
- 3 ☐ Bus, minibus or coach
- 4 ☐ Train or DART
- 5 ☐ Motor cycle or scooter
- 6 ☐ Driving a car
- 7 ☐ Passenger in a car
- 8 ☐ Lorry or van
- 9 ☐ Other means
- 10 ☐ Work mainly at or from home
- 11 ☐ Not applicable

- 15 What time do you usually leave home to go to work, school or college?**

- 1 ☐ Before 06:30
- 2 ☐ 06:31–07:00
- 3 ☐ 07:01–07:30
- 4 ☐ 07:31–08:00
- 5 ☐ 08:01–08:30
- 6 ☐ 08:31–09:00
- 7 ☐ 09:01–09:30
- 8 ☐ after 9:30
- 9 ☐ Not applicable

- 16 What distance is your journey from home to work, school or college and how long does it usually take?**
 Write in distance to the nearest kilometre and journey time in minutes.

Note: 1 mile = 1.6km approx.

Kilometres	<input type="text"/>	<input type="text"/>	<input type="text"/>
Minutes	<input type="text"/>	<input type="text"/>	<input type="text"/>

- 17 If you are aged under 15, your questions are now finished. Go to questions for Person 3 on page 10.**



- 18 Have you ceased your full-time education?**

- 1 ☐ Yes
- 2 ☐ No

If 'YES', write in AGE at which it ceased.

<input type="text"/>	<input type="text"/>
----------------------	----------------------

- 19 What is the highest level of education (full-time or part-time) which you have completed to date?**
☒ one box only.

- 1 ☐ No formal education
- 2 ☐ Primary education
- Second Level**
- 3 ☐ Lower secondary:
Junior/Intermediate/Group Certificate, 'O' Levels /GCSEs, NCVA Foundation Certificate, Basic Skills Training Certificate or equivalent
- 4 ☐ Upper secondary:
Leaving Certificate (including Applied and Vocational Programmes), 'A' Levels, NCVA Level 1 Certificate or equivalent
- 5 ☐ Technical or Vocational qualification:
Completed Apprenticeship, NCVA Level 2/3 Certificate, Teagasc Certificate/Diploma or equivalent
- 6 ☐ Both Upper secondary and Technical or Vocational qualification
- Third Level**
- 7 ☐ Non Degree:
National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma
- 8 ☐ Primary Degree (Third Level Bachelor Degree)
- 9 ☐ Professional qualification (of Degree status at least)
- 10 ☐ Both a Degree and a Professional qualification
- 11 ☐ Postgraduate Certificate or Diploma
- 12 ☐ Postgraduate Degree (Masters)
- 13 ☐ Doctorate (Ph.D)

- 20 Do you hold any THIRD LEVEL qualification(s) which you attained after completing 2 or more years of study?**

- 1 ☐ Yes
- 2 ☐ No

If 'YES', please indicate the main subject area(s) in which the qualification(s) is held.
☒ ALL the boxes that apply.

- 1 ☐ Education
- 2 ☐ Humanities and Arts (including Foreign Languages, History, Philosophy, Fine Arts, Music and Performing Arts, Design)
- 3 ☐ Social Sciences/Business/Law (including Psychology, Economics, Journalism, Finance, Accounting)
- 4 ☐ Life Science, Physical Science, Mathematics and Statistics
- 5 ☐ Computing
- 6 ☐ Engineering, Manufacturing and Construction (including Architecture)
- 7 ☐ Agriculture and Veterinary (including Forestry, Fishery, Horticulture)
- 8 ☐ Health (including Medicine, Nursing, Dental studies, Therapy and Rehabilitation, Pharmacy)
- 9 ☐ Social Services (including Child care and Youth services, Social Work and Counselling)
- 10 ☐ Services (including Hotel, Catering, Sports, Transport, Environmental Protection, Security, Occupational Health and Safety, Military and Defence)

- 21 Do you regularly do any unpaid work looking after the home or family?**
 Examples include: looking after children, cooking, cleaning, gardening, repairs and shopping.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

- 22 Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?**
 Include problems which are due to old age.
 Personal help includes help with basic tasks such as feeding or dressing.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

- 23 In the last 4 weeks have you done any of the following activities without pay?**
☒ ALL the boxes that apply.

- 1 ☐ Helping or voluntary work with a social or charitable organisation
- 2 ☐ Helping or voluntary work with a religious group or church
- 3 ☐ Helping or voluntary work with a sporting organisation
- 4 ☐ Helping or voluntary work with a political or cultural organisation
- 5 ☐ Any other voluntary activity

- 24 How would you describe your present principal status?**
☒ one box only.

- 1 ☐ Working for payment or profit
- 2 ☐ Looking for first regular job
- 3 ☐ Unemployed
- 4 ☐ Student or pupil
- 5 ☐ Looking after home/family
- 6 ☐ Retired from employment
- 7 ☐ Unable to work due to permanent sickness or disability
- 8 ☐ Other, write in

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

HIE

14 How do you usually travel to work, school or college?

✓ one box only, for the longest part, by distance, of your usual journey to work, school or college.

- 1 ☐ On foot
- 2 ☐ Bicycle
- 3 ☐ Bus, minibus or coach
- 4 ☐ Train or DART
- 5 ☐ Motor cycle or scooter
- 6 ☐ Driving a car
- 7 ☐ Passenger in a car
- 8 ☐ Lorry or van
- 9 ☐ Other means
- 10 ☐ Work mainly at or from home
- 11 ☐ Not applicable

15 What time do you usually leave home to go to work, school or college?

- 1 ☐ Before 06:30
- 2 ☐ 06:31–07:00
- 3 ☐ 07:01–07:30
- 4 ☐ 07:31–08:00
- 5 ☐ 08:01–08:30
- 6 ☐ 08:31–09:00
- 7 ☐ 09:01–09:30
- 8 ☐ after 9:30
- 9 ☐ Not applicable

16 What distance is your journey from home to work, school or college and how long does it usually take?

Write in distance to the nearest kilometre and journey time in minutes.

Note: 1 mile = 1.6km approx.

Kilometres	<input type="text"/>	<input type="text"/>	<input type="text"/>
Minutes	<input type="text"/>	<input type="text"/>	<input type="text"/>

17 If you are aged under 15, your questions are now finished. Go to questions for Person 4 on page 13.



18 Have you ceased your full-time education?

- 1 ☐ Yes
- 2 ☐ No

If 'YES', write in AGE at which it ceased.

<input type="text"/>	<input type="text"/>
----------------------	----------------------

19 What is the highest level of education (full-time or part-time) which you have completed to date?

✓ one box only.

- 1 ☐ No formal education
- 2 ☐ Primary education
- Second Level**
- 3 ☐ Lower secondary:
Junior/Intermediate/Group Certificate, 'O' Levels /GCSEs, NCVA Foundation Certificate, Basic Skills Training Certificate or equivalent
- 4 ☐ Upper secondary:
Leaving Certificate (including Applied and Vocational Programmes), 'A' Levels, NCVA Level 1 Certificate or equivalent
- 5 ☐ Technical or Vocational qualification:
Completed Apprenticeship, NCVA Level 2/3 Certificate, Teagasc Certificate/Diploma or equivalent
- 6 ☐ Both Upper secondary and Technical or Vocational qualification
- Third Level**
- 7 ☐ Non Degree:
National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma
- 8 ☐ Primary Degree (Third Level Bachelor Degree)
- 9 ☐ Professional qualification (of Degree status at least)
- 10 ☐ Both a Degree and a Professional qualification
- 11 ☐ Postgraduate Certificate or Diploma
- 12 ☐ Postgraduate Degree (Masters)
- 13 ☐ Doctorate (Ph.D)

20 Do you hold any THIRD LEVEL qualification(s) which you attained after completing 2 or more years of study?

- 1 ☐ Yes
- 2 ☐ No

If 'YES', please indicate the main subject area(s) in which the qualification(s) is held.

✓ ALL the boxes that apply.

- 1 ☐ Education
- 2 ☐ Humanities and Arts (including Foreign Languages, History, Philosophy, Fine Arts, Music and Performing Arts, Design)
- 3 ☐ Social Sciences/Business/Law (including Psychology, Economics, Journalism, Finance, Accounting)
- 4 ☐ Life Science, Physical Science, Mathematics and Statistics
- 5 ☐ Computing
- 6 ☐ Engineering, Manufacturing and Construction (including Architecture)
- 7 ☐ Agriculture and Veterinary (including Forestry, Fishery, Horticulture)
- 8 ☐ Health (including Medicine, Nursing, Dental studies, Therapy and Rehabilitation, Pharmacy)
- 9 ☐ Social Services (including Child care and Youth services, Social Work and Counselling)
- 10 ☐ Services (including Hotel, Catering, Sports, Transport, Environmental Protection, Security, Occupational Health and Safety, Military and Defence)

21 Do you regularly do any unpaid work looking after the home or family?

Examples include: looking after children, cooking, cleaning, gardening, repairs and shopping.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

22 Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?

Include problems which are due to old age.

Personal help includes help with basic tasks such as feeding or dressing.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

23 In the last 4 weeks have you done any of the following activities without pay?

✓ ALL the boxes that apply.

- 1 ☐ Helping or voluntary work with a social or charitable organisation
- 2 ☐ Helping or voluntary work with a religious group or church
- 3 ☐ Helping or voluntary work with a sporting organisation
- 4 ☐ Helping or voluntary work with a political or cultural organisation
- 5 ☐ Any other voluntary activity

24 How would you describe your present principal status?

✓ one box only.

- 1 ☐ Working for payment or profit
- 2 ☐ Looking for first regular job
- 3 ☐ Unemployed
- 4 ☐ Student or pupil
- 5 ☐ Looking after home/family
- 6 ☐ Retired from employment
- 7 ☐ Unable to work due to permanent sickness or disability
- 8 ☐ Other, write in

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[illegible]

Acres
 OR
 Hectares

[illegible][illegible]

2 ☐ No fixed place of work

[illegible]

Per year	or	Weekly equivalent (approx.)
Nil	1	Nil
Less than €6,000	2	Less than €120
€6,000 to €7,999	3	€121 to €154
€8,000 to €9,999	4	€155 to €190
€10,000 to €14,999	5	€191 to €290
€15,000 to €19,999	6	€291 to €385
€20,000 to €24,999	7	€386 to €480
€25,000 to €29,999	8	€481 to €580
€30,000 to €39,999	9	€581 to €770
€40,000 to €49,999	10	€771 to €960
€50,000 to €59,999	11	€961 to €1155
€60,000 and over	12	€1155 and over



Yes	No
1 <input type="checkbox"/>	2 <input type="checkbox"/>

- 14 How do you usually travel to work, school or college?**
☒ one box only, for the longest part, by distance, of your usual journey to work, school or college.

- 1 ☐ On foot
- 2 ☐ Bicycle
- 3 ☐ Bus, minibus or coach
- 4 ☐ Train or DART
- 5 ☐ Motor cycle or scooter
- 6 ☐ Driving a car
- 7 ☐ Passenger in a car
- 8 ☐ Lorry or van
- 9 ☐ Other means
- 10 ☐ Work mainly at or from home
- 11 ☐ Not applicable

- 15 What time do you usually leave home to go to work, school or college?**

- 1 ☐ Before 06:30
- 2 ☐ 06:31–07:00
- 3 ☐ 07:01–07:30
- 4 ☐ 07:31–08:00
- 5 ☐ 08:01–08:30
- 6 ☐ 08:31–09:00
- 7 ☐ 09:01–09:30
- 8 ☐ after 9:30
- 9 ☐ Not applicable

- 16 What distance is your journey from home to work, school or college and how long does it usually take?**
 Write in distance to the nearest kilometre and journey time in minutes.

Note: 1 mile = 1.6km approx.

Kilometres

Minutes

- 17 If you are aged under 15, your questions are now finished. Go to questions for Person 5 on page 16.**



- 18 Have you ceased your full-time education?**

- 1 ☐ Yes
- 2 ☐ No

If 'YES', write in AGE at which it ceased.

<input type="text"/>	<input type="text"/>
----------------------	----------------------

- 19 What is the highest level of education (full-time or part-time) which you have completed to date?**
☒ one box only.

- 1 ☐ No formal education
- 2 ☐ Primary education
- Second Level**
- 3 ☐ Lower secondary:
Junior/Intermediate/Group Certificate, 'O' Levels /GCSEs, NCVA Foundation Certificate, Basic Skills Training Certificate or equivalent
- 4 ☐ Upper secondary:
Leaving Certificate (including Applied and Vocational Programmes), 'A' Levels, NCVA Level 1 Certificate or equivalent
- 5 ☐ Technical or Vocational qualification:
Completed Apprenticeship, NCVA Level 2/3 Certificate, Teagasc Certificate/Diploma or equivalent
- 6 ☐ Both Upper secondary and Technical or Vocational qualification
- Third Level**
- 7 ☐ Non Degree:
National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma
- 8 ☐ Primary Degree (Third Level Bachelor Degree)
- 9 ☐ Professional qualification (of Degree status at least)
- 10 ☐ Both a Degree and a Professional qualification
- 11 ☐ Postgraduate Certificate or Diploma
- 12 ☐ Postgraduate Degree (Masters)
- 13 ☐ Doctorate (Ph.D)

- 20 Do you hold any THIRD LEVEL qualification(s) which you attained after completing 2 or more years of study?**

- 1 ☐ Yes
- 2 ☐ No

If 'YES', please indicate the main subject area(s) in which the qualification(s) is held.
☒ ALL the boxes that apply.

- 1 ☐ Education
- 2 ☐ Humanities and Arts (including Foreign Languages, History, Philosophy, Fine Arts, Music and Performing Arts, Design)
- 3 ☐ Social Sciences/Business/Law (including Psychology, Economics, Journalism, Finance, Accounting)
- 4 ☐ Life Science, Physical Science, Mathematics and Statistics
- 5 ☐ Computing
- 6 ☐ Engineering, Manufacturing and Construction (including Architecture)
- 7 ☐ Agriculture and Veterinary (including Forestry, Fishery, Horticulture)
- 8 ☐ Health (including Medicine, Nursing, Dental studies, Therapy and Rehabilitation, Pharmacy)
- 9 ☐ Social Services (including Child care and Youth services, Social Work and Counselling)
- 10 ☐ Services (including Hotel, Catering, Sports, Transport, Environmental Protection, Security, Occupational Health and Safety, Military and Defence)

- 21 Do you regularly do any unpaid work looking after the home or family?**
 Examples include: looking after children, cooking, cleaning, gardening, repairs and shopping.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

- 22 Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?**
 Include problems which are due to old age.
 Personal help includes help with basic tasks such as feeding or dressing.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

- 23 In the last 4 weeks have you done any of the following activities without pay?**
☒ ALL the boxes that apply.

- 1 ☐ Helping or voluntary work with a social or charitable organisation
- 2 ☐ Helping or voluntary work with a religious group or church
- 3 ☐ Helping or voluntary work with a sporting organisation
- 4 ☐ Helping or voluntary work with a political or cultural organisation
- 5 ☐ Any other voluntary activity

- 24 How would you describe your present principal status?**
☒ one box only.

- 1 ☐ Working for payment or profit
- 2 ☐ Looking for first regular job
- 3 ☐ Unemployed
- 4 ☐ Student or pupil
- 5 ☐ Looking after home/family
- 6 ☐ Retired from employment
- 7 ☐ Unable to work due to permanent sickness or disability
- 8 ☐ Other, write in

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[illegible]

--	--	--	--

Acres

OR

Hectares

[illegible][illegible]

2 ☐ No fixed place of work

[illegible]

Per year	or	Weekly equivalent (approx.)
Nil	1	■ Nil
Less than €6,000	2	■ Less than €120
€6,000 to €7,999	3	■ €121 to €154
€8,000 to €9,999	4	■ €155 to €190
€10,000 to €14,999	5	■ €191 to €290
€15,000 to €19,999	6	■ €291 to €385
€20,000 to €24,999	7	■ €386 to €480
€25,000 to €29,999	8	■ €481 to €580
€30,000 to €39,999	9	■ €581 to €770
€40,000 to €49,999	10	■ €771 to €960
€50,000 to €59,999	11	■ €961 to €1155
€60,000 and over	12	■ €1155 and over



Person 5

Tick boxes like this ☒

Write in BLOCK CAPITALS.

1 What is your name? (Person 5)

First name and surname

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2 Sex

1 ☐ Male

2 ☐ Female

3 What is your relationship to Persons 1, 2, 3 and 4?

See example on back page.

☒ one box only for each person.

Relationship of PERSON 5 to		Persons 1 2 3 4			
Husband or wife	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother or father	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-mother or step-father	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son-in-law or daughter-in-law	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandchild	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other related	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unrelated	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4 What is your date of birth?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

5 What is your place of birth?

Give the place where your mother lived at the time of your birth.

If IRELAND (including Northern Ireland), write in the COUNTY.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

If elsewhere ABROAD, write in the COUNTRY.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

6 What is your Nationality?

If you have more than one nationality, please declare all of them.

1 ☐ Irish

2 ☐ Other NATIONALITY, write in

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 ☐ No nationality

7 Where do you usually live?

1 ☐ HERE at this address

2 ☐ Elsewhere in IRELAND (including Northern Ireland), write in the COUNTY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 ☐ Elsewhere ABROAD, write in the COUNTRY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

8 What is your current marital status?

☒ one box only.

1 ☐ Single (never Married)

2 ☐ Married (first Marriage)

3 ☐ Re-married (following Widowhood)

4 ☐ Re-married (following Divorce/Annulment)

5 ☐ Separated (including Deserted)

6 ☐ Divorced

7 ☐ Widowed

9 How many children have you given birth to?

This question is for women only.

Write in number of children born alive.

1 ☐ None

--	--

10 Can you understand, read, write or speak Irish?

☒ ALL the boxes that apply.

1 ☐ No knowledge of Irish

2 ☐ Understand

3 ☐ Read

4 ☐ Write

5 ☐ Speak

If you can speak Irish, how often do you speak it?

☒ the appropriate box or boxes.

1 ☐ Daily, within the education system

2 ☐ Daily, outside the education system

3 ☐ Weekly

4 ☐ Less often

5 ☐ Never

11 What is your ethnic group?

Choose ONE section from A to D, then ☒ the appropriate box to indicate your cultural background.

A White

1 ☐ Irish

2 ☐ Irish Traveller

3 ☐ Any other White background

B Black or Black Irish

4 ☐ African

5 ☐ Any other Black background

C Asian or Asian Irish

6 ☐ Chinese

7 ☐ Any other Asian background

D Other including mixed background, write in description

8 ☐ Other including mixed background

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

12 Do you have any of the following long-lasting conditions?

(a) Blindness, deafness or a severe vision or hearing impairment?

Yes No
1 ☐ 2 ☐

(b) A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting or carrying?

Yes No
1 ☐ 2 ☐

(c) A learning or intellectual disability?

Yes No
1 ☐ 2 ☐

(d) A psychological or emotional condition?

Yes No
1 ☐ 2 ☐

(e) Other, including any chronic illness?

Yes No
1 ☐ 2 ☐

13 IF 'YES' to any of the conditions specified in Question 12, do you have any difficulty in doing any of the following activities?

(a) Learning, remembering or concentrating?

Yes No
1 ☐ 2 ☐

(b) Dressing, bathing or getting around inside the home?

Yes No
1 ☐ 2 ☐

(c) Going outside the home alone to shop or visit a doctor's surgery?

Yes No
1 ☐ 2 ☐

(d) Working at a job or business or attending school or college?

Yes No
1 ☐ 2 ☐

(e) Participating in other activities, for example leisure or using transport?

Yes No
1 ☐ 2 ☐

14 How do you usually travel to work, school or college?

✓ one box only, for the longest part, by distance, of your usual journey to work, school or college.

- 1 ☐ On foot
- 2 ☐ Bicycle
- 3 ☐ Bus, minibus or coach
- 4 ☐ Train or DART
- 5 ☐ Motor cycle or scooter
- 6 ☐ Driving a car
- 7 ☐ Passenger in a car
- 8 ☐ Lorry or van
- 9 ☐ Other means
- 10 ☐ Work mainly at or from home
- 11 ☐ Not applicable

15 What time do you usually leave home to go to work, school or college?

- 1 ☐ Before 06:30
- 2 ☐ 06:31–07:00
- 3 ☐ 07:01–07:30
- 4 ☐ 07:31–08:00
- 5 ☐ 08:01–08:30
- 6 ☐ 08:31–09:00
- 7 ☐ 09:01–09:30
- 8 ☐ after 9:30
- 9 ☐ Not applicable

16 What distance is your journey from home to work, school or college and how long does it usually take?

Write in distance to the nearest kilometre and journey time in minutes.

Note: 1 mile = 1.6km approx.

Kilometres	<input type="text"/>	<input type="text"/>	<input type="text"/>
Minutes	<input type="text"/>	<input type="text"/>	<input type="text"/>

17 If you are aged under 15, your questions are now finished. Go to questions for Person 6 on page 19.



18 Have you ceased your full-time education?

- 1 ☐ Yes
- 2 ☐ No

If 'YES', write in AGE at which it ceased.

<input type="text"/>	<input type="text"/>
----------------------	----------------------

19 What is the highest level of education (full-time or part-time) which you have completed to date?

✓ one box only.

- 1 ☐ No formal education
- 2 ☐ Primary education
- Second Level**
- 3 ☐ Lower secondary:
Junior/Intermediate/Group Certificate, 'O' Levels /GCSEs, NCVA Foundation Certificate, Basic Skills Training Certificate or equivalent
- 4 ☐ Upper secondary:
Leaving Certificate (including Applied and Vocational Programmes), 'A' Levels, NCVA Level 1 Certificate or equivalent
- 5 ☐ Technical or Vocational qualification:
Completed Apprenticeship, NCVA Level 2/3 Certificate, Teagasc Certificate/Diploma or equivalent
- 6 ☐ Both Upper secondary and Technical or Vocational qualification
- Third Level**
- 7 ☐ Non Degree:
National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma
- 8 ☐ Primary Degree (Third Level Bachelor Degree)
- 9 ☐ Professional qualification (of Degree status at least)
- 10 ☐ Both a Degree and a Professional qualification
- 11 ☐ Postgraduate Certificate or Diploma
- 12 ☐ Postgraduate Degree (Masters)
- 13 ☐ Doctorate (Ph.D)

20 Do you hold any THIRD LEVEL qualification(s) which you attained after completing 2 or more years of study?

- 1 ☐ Yes
- 2 ☐ No

If 'YES', please indicate the main subject area(s) in which the qualification(s) is held.

✓ ALL the boxes that apply.

- 1 ☐ Education
- 2 ☐ Humanities and Arts (including Foreign Languages, History, Philosophy, Fine Arts, Music and Performing Arts, Design)
- 3 ☐ Social Sciences/Business/Law (including Psychology, Economics, Journalism, Finance, Accounting)
- 4 ☐ Life Science, Physical Science, Mathematics and Statistics
- 5 ☐ Computing
- 6 ☐ Engineering, Manufacturing and Construction (including Architecture)
- 7 ☐ Agriculture and Veterinary (including Forestry, Fishery, Horticulture)
- 8 ☐ Health (including Medicine, Nursing, Dental studies, Therapy and Rehabilitation, Pharmacy)
- 9 ☐ Social Services (including Child care and Youth services, Social Work and Counselling)
- 10 ☐ Services (including Hotel, Catering, Sports, Transport, Environmental Protection, Security, Occupational Health and Safety, Military and Defence)

21 Do you regularly do any unpaid work looking after the home or family?

Examples include: looking after children, cooking, cleaning, gardening, repairs and shopping.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

22 Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?

Include problems which are due to old age.

Personal help includes help with basic tasks such as feeding or dressing.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

23 In the last 4 weeks have you done any of the following activities without pay?

✓ ALL the boxes that apply.

- 1 ☐ Helping or voluntary work with a social or charitable organisation
- 2 ☐ Helping or voluntary work with a religious group or church
- 3 ☐ Helping or voluntary work with a sporting organisation
- 4 ☐ Helping or voluntary work with a political or cultural organisation
- 5 ☐ Any other voluntary activity

24 How would you describe your present principal status?

✓ one box only.

- 1 ☐ Working for payment or profit
- 2 ☐ Looking for first regular job
- 3 ☐ Unemployed
- 4 ☐ Student or pupil
- 5 ☐ Looking after home/family
- 6 ☐ Retired from employment
- 7 ☐ Unable to work due to permanent sickness or disability
- 8 ☐ Other, write in

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

- 14 How do you usually travel to work, school or college?**
☒ one box only, for the longest part, by distance, of your usual journey to work, school or college.

- 1 ☐ On foot
- 2 ☐ Bicycle
- 3 ☐ Bus, minibus or coach
- 4 ☐ Train or DART
- 5 ☐ Motor cycle or scooter
- 6 ☐ Driving a car
- 7 ☐ Passenger in a car
- 8 ☐ Lorry or van
- 9 ☐ Other means
- 10 ☐ Work mainly at or from home
- 11 ☐ Not applicable

- 15 What time do you usually leave home to go to work, school or college?**

- 1 ☐ Before 06:30
- 2 ☐ 06:31–07:00
- 3 ☐ 07:01–07:30
- 4 ☐ 07:31–08:00
- 5 ☐ 08:01–08:30
- 6 ☐ 08:31–09:00
- 7 ☐ 09:01–09:30
- 8 ☐ after 9:30
- 9 ☐ Not applicable

- 16 What distance is your journey from home to work, school or college and how long does it usually take?**
 Write in distance to the nearest kilometre and journey time in minutes.

Note: 1 mile = 1.6km approx.

Kilometres	<input type="text"/>	<input type="text"/>	<input type="text"/>
Minutes	<input type="text"/>	<input type="text"/>	<input type="text"/>

- 17 If you are aged under 15, your questions are now finished. Go to questions on page 22.**



- 18 Have you ceased your full-time education?**

- 1 ☐ Yes
- 2 ☐ No

If 'YES', write in AGE at which it ceased.

<input type="text"/>	<input type="text"/>
----------------------	----------------------

- 19 What is the highest level of education (full-time or part-time) which you have completed to date?**
☒ one box only.

- 1 ☐ No formal education
- 2 ☐ Primary education
- Second Level**
- 3 ☐ Lower secondary:
Junior/Intermediate/Group Certificate, 'O' Levels /GCSEs, NCVA Foundation Certificate, Basic Skills Training Certificate or equivalent
- 4 ☐ Upper secondary:
Leaving Certificate (including Applied and Vocational Programmes), 'A' Levels, NCVA Level 1 Certificate or equivalent
- 5 ☐ Technical or Vocational qualification:
Completed Apprenticeship, NCVA Level 2/3 Certificate, Teagasc Certificate/Diploma or equivalent
- 6 ☐ Both Upper secondary and Technical or Vocational qualification
- Third Level**
- 7 ☐ Non Degree:
National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma
- 8 ☐ Primary Degree (Third Level Bachelor Degree)
- 9 ☐ Professional qualification (of Degree status at least)
- 10 ☐ Both a Degree and a Professional qualification
- 11 ☐ Postgraduate Certificate or Diploma
- 12 ☐ Postgraduate Degree (Masters)
- 13 ☐ Doctorate (Ph.D)

- 20 Do you hold any THIRD LEVEL qualification(s) which you attained after completing 2 or more years of study?**

- 1 ☐ Yes
- 2 ☐ No

If 'YES', please indicate the main subject area(s) in which the qualification(s) is held.
☒ ALL the boxes that apply.

- 1 ☐ Education
- 2 ☐ Humanities and Arts (including Foreign Languages, History, Philosophy, Fine Arts, Music and Performing Arts, Design)
- 3 ☐ Social Sciences/Business/Law (including Psychology, Economics, Journalism, Finance, Accounting)
- 4 ☐ Life Science, Physical Science, Mathematics and Statistics
- 5 ☐ Computing
- 6 ☐ Engineering, Manufacturing and Construction (including Architecture)
- 7 ☐ Agriculture and Veterinary (including Forestry, Fishery, Horticulture)
- 8 ☐ Health (including Medicine, Nursing, Dental studies, Therapy and Rehabilitation, Pharmacy)
- 9 ☐ Social Services (including Child care and Youth services, Social Work and Counselling)
- 10 ☐ Services (including Hotel, Catering, Sports, Transport, Environmental Protection, Security, Occupational Health and Safety, Military and Defence)

- 21 Do you regularly do any unpaid work looking after the home or family?**
 Examples include: looking after children, cooking, cleaning, gardening, repairs and shopping.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

- 22 Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability?**
 Include problems which are due to old age.
 Personal help includes help with basic tasks such as feeding or dressing.

- 1 ☐ Yes, 1-14 hours a week
- 2 ☐ Yes, 15-28 hours a week
- 3 ☐ Yes, 29-42 hours a week
- 4 ☐ Yes, 43 or more hours a week
- 5 ☐ No

- 23 In the last 4 weeks have you done any of the following activities without pay?**
☒ ALL the boxes that apply.

- 1 ☐ Helping or voluntary work with a social or charitable organisation
- 2 ☐ Helping or voluntary work with a religious group or church
- 3 ☐ Helping or voluntary work with a sporting organisation
- 4 ☐ Helping or voluntary work with a political or cultural organisation
- 5 ☐ Any other voluntary activity

- 24 How would you describe your present principal status?**
☒ one box only.

- 1 ☐ Working for payment or profit
- 2 ☐ Looking for first regular job
- 3 ☐ Unemployed
- 4 ☐ Student or pupil
- 5 ☐ Looking after home/family
- 6 ☐ Retired from employment
- 7 ☐ Unable to work due to permanent sickness or disability
- 8 ☐ Other, write in

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[illegible]

				Acres	OR					Hectares
--	--	--	--	-------	----	--	--	--	--	----------

[illegible][illegible]

2 ☐ No fixed place of work

[illegible]

Persons temporarily away from the household on the night of Sunday 25 April

Answer questions A1 to A8 for any household members who usually live here at this address but who are NOT present on the night of Sunday 25 April. Include in particular students who are living away from home during term time who are NOT present at this address on the night of Sunday 25 April.

Absent Person 1

A1 What is this person's name?
First name and surname

A2 Sex

- 1 ☐ Male
2 ☐ Female

A3 What is the relationship of this person to Person 1 on page 3?
✓one box only

- 1 ☐ Husband or wife
2 ☐ Partner
3 ☐ Son or daughter
4 ☐ Other related, write in relationship

5 ☐ Unrelated (including foster children)

A4 What is this person's date of birth?

Day		Month		Year	
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>

A5 What is this person's current marital status?
✓one box only

- 1 ☐ Single (never Married)
2 ☐ Married (including Re-Married)
3 ☐ Separated (including Deserted)
4 ☐ Divorced
5 ☐ Widowed

A6 How long altogether is this person away for?
✓one box only

- 1 ☐ Less than 3 months
2 ☐ 3 months or more

A7 Was this person in the Republic of Ireland on Sunday 25 April?

- 1 ☐ Yes
2 ☐ No

A8 Is this person a student away at school or college?

- 1 ☐ Yes
2 ☐ No

Absent Person 2

A1 What is this person's name?
First name and surname

A2 Sex

- 1 ☐ Male
2 ☐ Female

A3 What is the relationship of this person to Person 1 on page 3?
✓one box only

- 1 ☐ Husband or wife
2 ☐ Partner
3 ☐ Son or daughter
4 ☐ Other related, write in relationship

5 ☐ Unrelated (including foster children)

A4 What is this person's date of birth?

Day		Month		Year	
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>

A5 What is this person's current marital status?
✓one box only

- 1 ☐ Single (never Married)
2 ☐ Married (including Re-Married)
3 ☐ Separated (including Deserted)
4 ☐ Divorced
5 ☐ Widowed

A6 How long altogether is this person away for?
✓one box only

- 1 ☐ Less than 3 months
2 ☐ 3 months or more

A7 Was this person in the Republic of Ireland on Sunday 25 April?

- 1 ☐ Yes
2 ☐ No

A8 Is this person a student away at school or college?

- 1 ☐ Yes
2 ☐ No

Absent Person 3

A1 What is this person's name?
First name and surname

A2 Sex

- 1 ☐ Male
2 ☐ Female

A3 What is the relationship of this person to Person 1 on page 3?
✓one box only

- 1 ☐ Husband or wife
2 ☐ Partner
3 ☐ Son or daughter
4 ☐ Other related, write in relationship

5 ☐ Unrelated (including foster children)

A4 What is this person's date of birth?

Day		Month		Year	
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>

A5 What is this person's current marital status?
✓one box only

- 1 ☐ Single (never Married)
2 ☐ Married (including Re-Married)
3 ☐ Separated (including Deserted)
4 ☐ Divorced
5 ☐ Widowed

A6 How long altogether is this person away for?
✓one box only

- 1 ☐ Less than 3 months
2 ☐ 3 months or more

A7 Was this person in the Republic of Ireland on Sunday 25 April?

- 1 ☐ Yes
2 ☐ No

A8 Is this person a student away at school or college?

- 1 ☐ Yes
2 ☐ No

Before you sign the declaration please check:

- That you have completed the household questions on page 2.
- That in List 1 on page 3, you have accounted for all persons (including visitors) who spent the night of Sunday 25 April in the household (if there are more than 6 persons present, please complete the relevant number of Individual Forms).
- That you have answered all questions which should have been answered for each person who spent the night of Sunday 25 April in the household (pages 4-21).
- That in List 2 on page 3, you have accounted for any household member who was temporarily away from the household on the night of Sunday 25 April (if there are more than 6 absent persons, please ask your Enumerator for guidance).
- That you have answered all questions on pages 22-23 for any household member temporarily away from the household on the night of Sunday 25 April.
- That no person has been double counted on the form.

Declaration to be completed by the person responsible for completing the form

I declare that this form is correct and complete to the best of my knowledge and belief.

Signature

You have now completed the Census form.

Thank you for your co-operation.

Example - Question 3 - Household members and their Relationships within the Household

For a household consisting of up to 5 persons, all persons after person 1 in the household, are required to give their relationship to the persons previously listed. For households consisting of 6 or more persons, Persons 5 and higher are required to give their relationship to Persons 1-4 only.

The example below shows how to complete the relationship question for a household consisting of; Helen Murphy, her husband Thomas, their daughter Catherine and grandchild Aoife (Catherine’s daughter).

Relationship question does not apply to person 1.	Name of Person 2		Name of Person 3		Name of Person 4		
Helen Murphy	Thomas Murphy		Catherine Murphy		Aoife Murphy		
	✓one box only for each person.		✓one box only for each person.		✓one box only for each person.		
	Relationship of PERSON 2 to	Person 1	Relationship of PERSON 3 to	Persons 1 2	Relationship of PERSON 4 to	Persons 1 2 3	
	Husband or wife	✓	Husband or wife	<input type="checkbox"/> <input type="checkbox"/>	Husband or wife	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Partner	<input type="checkbox"/>	Partner	<input type="checkbox"/> <input type="checkbox"/>	Partner	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Son or daughter	<input type="checkbox"/>	Son or daughter	✓ ✓	Son or daughter	<input type="checkbox"/> <input type="checkbox"/> ✓	
	Step-child	<input type="checkbox"/>	Step-child	<input type="checkbox"/> <input type="checkbox"/>	Step-child	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Brother or sister	<input type="checkbox"/>	Brother or sister	<input type="checkbox"/> <input type="checkbox"/>	Brother or sister	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Mother or father	<input type="checkbox"/>	Mother or father	<input type="checkbox"/> <input type="checkbox"/>	Mother or father	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Step-mother or Step-father	<input type="checkbox"/>	Step-mother or Step-father	<input type="checkbox"/> <input type="checkbox"/>	Step-mother or Step-father	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Son-in-law or Daughter-in-law	<input type="checkbox"/>	Son-in-law or Daughter-in-law	<input type="checkbox"/> <input type="checkbox"/>	Son-in-law or Daughter-in-law	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Grandchild	<input type="checkbox"/>	Grandchild	<input type="checkbox"/> <input type="checkbox"/>	Grandchild	✓ ✓ <input type="checkbox"/>	
	Other related	<input type="checkbox"/>	Other related	<input type="checkbox"/> <input type="checkbox"/>	Other related	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Unrelated	<input type="checkbox"/>	Unrelated	<input type="checkbox"/> <input type="checkbox"/>	Unrelated	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	