ASSISTANCE GUIDE – LARGE PRINT

NOTE: DO NOT WRITE ON THESE PAGES.

Enter all responses on the OFFICIAL CENSUS QUESTIONNAIRE. This guide provides a large print text of the basic questions and answer categories for the Census 2000 English Questionnaire.



U.S. Department of Commerce • Bureau of the Census



Your Census 2000 English Questionnaire is the official form for all the people at this address. It is quick and easy, and your answers are protected by law. Complete the Census and help your community get what it needs — today and in the future!

Start Here Please use a black or blue pen.

- 1. How many people were living or staying in this house, apartment, or mobile home on April 1, 2000?
 - Number of people

INCLUDE in this number:

- foster children, roomers, or housemates
- people staying here on April 1, 2000 who have no other permanent place to stay
- people living here most of the time while working, even if they have another place to live

DO NOT INCLUDE in this number:

- college students living away while attending college
- people in a correctional facility, nursing home, or mental hospital on April 1, 2000
- Armed Forces personnel living somewhere else
- people who live or stay at another place most of the time

	Person 1 (continued)
2.	Is this house, apartment, or mobile home —
	Mark NONE box.
	■ Owned by you or someone in this household
	with a mortgage or loan?
	■ Owned by you or someone in this household
	free and clear (without a mortgage or loan)?
	Rented for cash rent?
	■ Occupied without payment of cash rent?
3.	Please answer the following questions for each person
	living in this house, apartment, or mobile home. Start
	with the name of one of the people living here who owns,
	is buying, or rents this house, apartment, or mobile home.
	If there is no such person, start with any adult living or
	staying here. We will refer to this person as Person 1.
	What is this person's name? Print name below.
	Last Name
	First Name MI
4.	What is Person 1's telephone number? We may call this
	person if we don't understand an answer.
	Area Code + Number
5.	What is Person 1's sex? Mark 🗷 ONE box.
	■ Male ■ Female
6.	What is Person 1's age and what is Person 1's date of birth?
	Print numbers in boxes.
	Age on April 1, 2000 Month Day Year of birth

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Person 1 (continued)

\rightarrow	NOTE: Please answer BOTH Questions 7 and 8.
7.	Is Person 1 Spanish/Hispanic/Latino? Mark "No" box if not Spanish/Hispanic/Latino. ■ No, not Spanish/Hispanic/Latino ■ Yes, Puerto Rican
	☐ Yes, Mexican, Mexican Am., ☐ Yes, Cuban Chicano ■ Yes, ether Spanish/Hispanis/Latine Print group
	□ Yes, other Spanish/Hispanic/Latino – <i>Print group</i> . □ I I I I I I I I I I I I I I I I I I
8.	What is Person 1's race? Mark one or more races to indicate what this person considers himself/herself to be. White Black, African Am., or Negro American Indian or Alaska Native − Print name of enrolled or principal tribe. Asian Indian Japanese Native Hawaiian Chinese Korean Guamanian or Chamorro Filipino Vietnamese Samoan Other Asian − Print race. Other Pacific Islander − Print race. Print race. Other Pacific Islander − Print race. Print race. Other Pacific Islander − Print race.
	□ Some other race – <i>Print race</i> . □ I I I I I I I I I I I I I I I I I I
\rightarrow	If more people live here, continue with Person 2.

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1. What is this person's name? Print name below.

Last Name

First Name

MI

2. How is this person related to Person 1? Mark 🗷 ONE box.

■ Husband/wife

- If NOT RELATED to Person 1:
- Natural-born son/daughter Roomer, boarder
- Adopted son/daughter
- Housemate, roommate ■ Unmarried partner
- Stepson/stepdaughter ■ Brother/sister
- Foster child

■ Father/mother

Other nonrelative

- □ Grandchild
- Parent-in-law
- Son-in-law/daughter-in-law
- Other relative *Print* exact relationship

3. What is this person's sex? Mark 🗷 ONE box.

- Male
 - Female

4. What is this person's age and what is this person's date of birth?

Print numbers in boxes.

Age on April 1, 2000

Month

Day

Year of birth

Persons 2 – 6 (continued)

\rightarrow	NOTE: Please answer BOTH Questions 5 and 6.
5.	Is this person Spanish/Hispanic/Latino? Mark the "No" box if not Spanish/Hispanic/Latino.
	■ No, not Spanish/Hispanic/Latino ■ Yes, Puerto Rican
	□ Yes, Mexican, Mexican Am.,□ Yes, CubanChicano
	■ Yes, other Spanish/Hispanic/Latino – <i>Print group</i> . ✓
6.	What is this person's race? Mark 🗵 one or more races to
	indicate what this person considers himself/herself to be.
	■ White
	■ Black, African Am., or Negro
	■ American Indian or Alaska Native – <i>Print name of enrolled or principal tribe</i> .
	■ Asian Indian ■ Japanese ■ Native Hawaiian
	■ Chinese ■ Korean ■ Guamanian or Chamorro
	□ Filipino □ Vietnamese □ Samoan
	□ Other Asian – <i>Print race</i> . □ Other Pacific Islander –
	Print race.
	■ Some other race – <i>Print race</i> . \nearrow
\rightarrow	If more people live here, continue with the next person.



If you didn't have room to list everyone who lives in this house or apartment, please list the others below. You may be contacted by the Census Bureau for the same information about these people.

Person 7 – Last Name

First Name MI

Person 8 – Last Name

First Name MI

Person 9 – Last Name

First Name MI

Person 10 – Last Name

First Name MI

Person 11 – Last Name

First Name MI

Person 12 – Last Name

First Name MI

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The Census Bureau estimates that, for the average household, this form will take about 10 minutes to complete, including the time for reviewing the instructions and answers. Comments about the estimate should be directed to the Associate Director for Finance and Administration, Attn: Paperwork Reduction Project 0607-0856, Room 3104, Federal Building 3, Bureau of the Census, Washington, DC 20233.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget.

Thank you for completing your official U.S. Census 2000 form.





If you need help completing your Census 2000 form, call 1–800–471–9424 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

TDD – Telephone display device for the hearing impaired. Call 1-800-582-8330 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

¿NECESITA AYUDA? Si usted necesita ayuda para completar este cuestionario llame al 1–800–471–8642 entre las 8:00 a.m. y las 9:00 p.m., 7 días a la semana. La llamada telefónica es gratis.