## CENSUS OF IRELAND, 1901.

(Two Examples of the mode of filling up this Table are given on the other side.)

## FORM A.

	NAME and SUR	NAME.	RELATION to	RELIGIOUS PROFESSION.		-			slept or abode in this l	Touse on th	e night of SUND	AY, the 31st of 1	MARCH, 190
Number.	oe entered here: EXCEPT those (not enumerated elsewhere) who may be out at Work or TRAVELLING, de., during that Night, and who RETURN HOME ON MONDAY, APRIL 185.  Subject to the above instruction, the Name of the Head of the Family should be written first: then the names of his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servants, &c.  Christian Name		State whether "Head of Family," or "Wife, "Sou," "Daughter," or other relative; "Visitor," "Boarder," "Servant, "de.	State here the particular Religion, or Religious Denomination, to which each person belongs. Members of Protestant Denominations are requested not to describe themselves by the vague term "Protestant," but to enter the name of the Particular Church, Denomination.	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	
						Years on last Birth- day.	Infants under one	Males and "F" for	State the Particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attending a School, or receiving regular instruction at home, should be returned as Scholars.  Before filling this column you are requested to read the instructions on the other side.)	"Married." "Widower,"	If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "IRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & ENGLISH"	Welto the word
1	James M	Eveny	Head of Ta	mily Roman Cathol	Reid	1/0		M	7 P 1			ages. In other cases no entry should be made in this column.	infirmities opposit name of the afflicted person
2	John Ly	noh	Bala	1 . 1	P I-D	1		111	Farm Laboure	not Marrie	Co Cave		
3			U aroun	20	Cannol Kear	3/		11	Before filling this column you are requested to read the Instructions on the other side.)  Farm Laboure,  do	do	do		
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	I hereby certify	as required by	n the total	Wie., cap. 6, s. 6 (1), th				-					

(Signature of Enumerator.)

Enery (Signature of Head of Family).