CENSUS OF IRELAND, 1901.

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

FORM A.

(Signature of Head of Family).

oper.	NAME and SURNAME. No Persons Absent on the night of Sunday, March Sist, to be entered here: Except those (not enumerated elsewhere) who may be out at Work or Thayelling, de., during	nead of Family.	RELIGIOUS PROFESSION. 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, or Body, to which they belong.]	EDUCATION.			SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	AY, the 31st of M	
	who may be out at Work or Travelling, de., during that Night, and who retrent Home on Monday. APRIL 18t. 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. Surname.			State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years on last Birth- day.	Infants	Write "M" for Males and "F" for Females	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.]	Whether "Married." "Widower." "Widow," or "Not Married."	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" opposite the names of those who can speak both languages. In other cases no entry should be made in this column.	If Deaf and Dunb only; Blind; Imbecile or Idle or Lunatic. Write the respecting infirmities opposite name of the
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	I hereby certify, as required in the second Return is assessed in the second se											

Signature of Enumerator.)