## CENSUS OF IRELAND, 1901.

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

## FORM A.

No. on Form B.

RETURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House on the night of SUNDAY, the 31st of MARCH, 1901

| -        | NAME and SURNAME.  No Persons absent on the night of Sunday, March Alst. to be entered here; except those (not enumerated elsewhere) who may be out at Work or Travelling, &c., during that Night, and who return Home on Monday, April 1st.  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. |         | RELATION to Head of Family,  State whether "Head of Family, or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c. | State here the particular Religion, | EDUCATION.   | AGE.                       |   | SEX.                                     | RANK, PROFESSION, OR OCCUPATION.  | MARRIAGE. | , WHERE BORN.  | IRISH LANGUAGE.  | If Deaf and Dumb  |
|----------|---|---------|---|-------------------------------------|--|----------------------------|---|--|---|-----------|--|--|---|
|          |   |         |   |                                     | State here whether he or she<br>can "Read and Write," can<br>"Read" only,<br>or "Cannot Read." | Years<br>on last<br>Birth- | Months<br>for<br>Infants<br>under<br>one<br>Year. | 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 Schoolars.  Before filling this column you are requested to read the Instructions on the other side.] |           | If in Ireland, state in what<br>County or City; if else-<br>where, state the name of<br>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. | Dumb only; Blind; .mbecile or Idiot; or Lunatic.  Write the respective infirmities opposite the name of the afflicted person. |
| 1        | Mua   | Shorten |   | Pritiesan                           | ^  |                            |   |  |   |           |  |  |   |
| 2        |   |         |   | Wes where Church                    | Mead Whrite  | 29                         |   | *  | Libert  | not minud | منالسال  | Guille   |   |
| 3        |   |         |   | of Greland                          |  |                            |   |  |   |           |  | 0  |   |
| 4        |   |         |   | $\wedge$                            |  |                            |   |  |   |           |  |  |   |
| 5        |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 6        |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 7        |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 8        |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
|          |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 9        |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
|          |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 1        |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 12       |   |         |   |                                     |  |                            |   |  | -   |           |  |  |   |
| 13       | -   |         |   |                                     |  |                            |   |  |   |           |  |  |   |
| 14<br>15 |   |         |   |                                     |  |                            |   |  |   |           |  |  |   |

I hereby certify, as required by the Act 63 Vic., cap. 6, s. 6 (1), that the foregoing Return is correct, according to the best of my knowledge and belief.

| Notwar | (Signature of Enumerator.)