OF IRELAND, 1911. CENSUS

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

FORM A.

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 2nd of APRIL, 1911.

NAME AND SURNAME.			RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE (last Birthday) and SEX.		RANK, PROFESSION, OR OCCUPATION.	PARTICULARS AS TO MARRIAGE.				WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind;
	No Persons absent on the Night of Sunday, April 2nd, 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 8rd. 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.		"Head of Family," or "Wife,"	ligion, 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.]	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Insert Age opposite each name:—the Ages of Males in column 6, and the Ages of Females in column 7. For Infants under one year state the age in months, as "under 1 month," "1 month," "2 months," &c.		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.	Whether "Married," "Widower," "Widow,"	State for each Married Woman entered on this Schedule the number of :—			Write the word "IRISH" in this column opposite the	Imbecile or Idiot ; or Lunatic.	
Number.										Completed years the present Marriage has lasted. If less	If no chi alive, wri	Marriage. ldren born	If in Ireland, state in what County or City; if elsewhere, state the name of the Country.	opposite the names of those who can speak both languages. In other cases no entry	Write the respec- tive infirmities opposite the name of the afflicted person.
						Ages of Males.	Ages of Females.	Before filling this column you are requested to read the instructions on the other side.		than one year, write "under one."	Total Children born alive.	Children still living.		should be made in this column.	
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I hereby certify, as required by the Act 10 Edw. VII., and 1 Geo. V., cap. 11, that the foregoing Return is correct, according to the best of my knowledge and belief.

I believe the foregoing to be a true Return.

Ame Kivin Signature of Head of Family.

Swofmest onald _Signature of Enumerator.