

1890 QUESTIONNAIRE

(11 1/2" X 18", printed on both sides)

FAMILY SCHEDULE—I TO 10 PERSONS.

Supervisor's District No. _____	[7-556 b.]	Eleventh Census of the United States.
Enumeration District No. _____		SCHEDULE No. 1.
		POPULATION AND SOCIAL STATISTICS.
Name of city, town, township, _____; County: _____; State: _____;		
Street and No.: _____; Ward: _____; Name of Institution: _____.		
Enumerated by me on the _____ day of June, 1890. _____		
Enumerator.		

A.—Number of Dwelling-house in the order of visitation.	B.—Number of families in this dwelling-house.	C.—Number of persons in this dwelling-house.	D.—Number of Family in the order of visitation.	E.—No. of Persons in this family.	
INQUIRIES.	1	2	3	4	5
1 Christian name in full, and initial of middle name.					
Surname.					
2 Whether a soldier, sailor, or marine during the civil war (U. S. or Conf.), or widow of such person.					
3 Relationship to head of family.					
4 Whether white, black, mulatto, quadroon, octroon, Chinese, Japanese, or Indian.					
5 Sex.					
6 Age at nearest birthday. If under one year, give age in months.					
7 Whether single, married, widowed, or divorced.					
8 Whether married during the census year (June 1, 1888, to May 31, 1890).					
9 Mother of how many children, and number of these children living.					
10 Place of birth.					
11 Place of birth of Father .					
12 Place of birth of Mother .					
13 Number of years in the United States.					
14 Whether naturalized.					
15 Whether naturalization papers have been taken out.					
16 Profession, trade, or occupation.					
17 Months unemployed during the census year (June 1, 1888, to May 31, 1890).					
18 Attendance at school (in months) during the census year (June 1, 1888, to May 31, 1890).					
19 Able to Read .					
20 Able to Write .					
21 Able to speak English. If not, the language or dialect spoken.					
22 Whether suffering from acute or chronic disease, with name of disease and length of time afflicted.					
23 Whether defective in mind, sight, hearing, or speech, or whether crippled, maimed, or deformed, with name of defect.					
24 Whether a prisoner, convict, homeless child, or pauper.					
25 Supplemental schedule and page.					

TO ENUMERATORS.—See inquiries numbered 26 to 30, inclusive, on the second page of this schedule. These inquiries must be made concerning each family and each farm visited.

SCHEDULE No. 1.—POPULATION AND SOCIAL STATISTICS.

INQUIRIES.		6	7	8	9	10
1	Christian name in full, and initial of middle name.					
	Surname.					
2	Whether a soldier, sailor, or marine during the civil war (U. S. or Conf.), or widow of such person.					
3	Relationship to head of family.					
4	Whether white, black, mulatto, quadroon, octroon, Chinese, Japanese, or Indian.					
5	Sex.					
6	Age at nearest birthday. If under one year, give age in months.					
7	Whether single, married, widowed, or divorced.					
8	Whether married during the census year (June 1, 1889, to May 31, 1890).					
9	Mother of how many children, and number of these children living.					
10	Place of birth.					
11	Place of birth of Father .					
12	Place of birth of Mother .					
13	Number of years in the United States.					
14	Whether naturalized.					
15	Whether naturalization papers have been taken out.					
16	Profession, trade, or occupation.					
17	Months unemployed during the census year (June 1, 1889, to May 31, 1890).					
18	Attendance at school (in months) during the census year (June 1, 1889, to May 31, 1890).					
19	Able to Read .					
20	Able to Write .					
21	Able to speak English. If not, the language or dialect spoken.					
22	Whether suffering from acute or chronic disease, with name of disease and length of time afflicted.					
23	Whether defective in mind, sight, hearing, or speech, or whether crippled, maimed, or deformed, with name of defect.					
24	Whether a prisoner, convict, homeless child, or pauper.					
25	Supplemental schedule and page.					
26	Is the home you live in hired, or is it owned by the head or by a member of the family ?					
27	If owned by head or member of family, is the home free from mortgage incumbrance ?					
28	If the head of family is a farmer, is the farm which he cultivates hired, or is it owned by him or by a member of his family ?					
29	If owned by head or member of family, is the farm free from mortgage incumbrance ?					
30	If the home or farm is owned by head or member of family, and mortgaged, give the post-office address of owner.					

TO ENUMERATORS.—The inquiries numbered 26 to 30, inclusive, must be made concerning each family and each farm visited.

(1897-1,780,000.) 2 b