

**Start here** OR go online at [survey.census.gov](http://survey.census.gov) to complete the 2017 Census Test.

Use a blue or black pen.

Before you answer Question 1, count the people living in this house, apartment, or mobile home using our guidelines.

- Count all people, including babies, who live and sleep here most of the time.
- If no one lives or sleeps at this address, go online at [survey.census.gov](http://survey.census.gov) or call the number on page 16.

The Census must also include people without a permanent place to live, so:

- If someone who does not have a permanent place to live is staying here on April 1, 2017, count that person.

The Census Bureau also conducts counts in institutions and other places, so:

- Do not count anyone living away from here, either at college or in the Armed Forces.
- Do not count anyone in a nursing home, jail, prison, detention facility, etc., on April 1, 2017.
- Leave these people off your form, even if they will return to live here after they leave college, the nursing home, the military, jail, etc. Otherwise, they may be counted twice.

**1. How many people were living or staying in this house, apartment, or mobile home on April 1, 2017?**

Number of people =

**2. Were there any additional people staying here on April 1, 2017 that you did not include in Question 1?**

Mark  all that apply.

- Children, related or unrelated, such as newborn babies, grandchildren, or foster children
- Relatives, such as adult children, cousins, or in-laws
- Nonrelatives, such as roommates or live-in babysitters
- People staying here temporarily
- No additional people

**3. Is this house, apartment, or mobile home — Mark  ONE box.**

- Owned by you or someone in this household with a mortgage or loan? *Include home equity loans.*
- Owned by you or someone in this household free and clear (without a mortgage or loan)?
- Rented?
- Occupied without payment of rent?

**4. What is your telephone number?**

*We will only contact you if needed for official Census Bureau business.*

Telephone Number

-    -

## Person 1

5. Please provide information for each person living here. If there is someone living here who pays the rent or owns this residence, start by listing him or her as Person 1. If the owner or the person who pays the rent does not live here, start by listing any adult living here as Person 1.

What is Person 1's name? Print name below.

First Name	MI
<input type="text"/>	<input type="text"/>
Last Name(s)	
<input type="text"/>	

6. What is Person 1's sex? Mark  ONE box.

Male  Female

7. What is Person 1's age and what is Person 1's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.

Age on April 1, 2017	Print numbers in boxes.		
	Month	Day	Year of birth
<input type="text"/> years	<input type="text"/>	<input type="text"/>	<input type="text"/>

8. What is Person 1's race or ethnicity?

Mark all boxes that apply **AND** print ethnicities in the spaces below. Note, you may report more than one group.

- WHITE** – Provide details below.

German  Irish  English  
 Italian  Polish  French

Print, for example, Scottish, Norwegian, Dutch, etc.

- HISPANIC, LATINO, OR SPANISH** – Provide details below.

Mexican or Mexican American  Puerto Rican  Cuban  
 Salvadoran  Dominican  Colombian

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

- BLACK OR AFRICAN AMERICAN** – Provide details below.

African American  Jamaican  Haitian  
 Nigerian  Ethiopian  Somali

Print, for example, Ghanaian, South African, Barbadian, etc.

- ASIAN** – Provide details below.

Chinese  Filipino  Asian Indian  
 Vietnamese  Korean  Japanese

Print, for example, Pakistani, Cambodian, Hmong, etc.

- AMERICAN INDIAN OR ALASKA NATIVE** – Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

- MIDDLE EASTERN OR NORTH AFRICAN** – Provide details below.

Lebanese  Iranian  Egyptian  
 Syrian  Moroccan  Israeli

Print, for example, Algerian, Iraqi, Kurdish, etc.

- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER** – Provide details below.

Native Hawaiian  Samoan  Chamorro  
 Tongan  Fijian  Marshallese

Print, for example, Palauan, Tahitian, Chuukese, etc.

- SOME OTHER RACE OR ETHNICITY** – Print details.



1. Print name of

Person 2

First Name

MI

Input boxes for first name and middle initial

Last Name(s)

Input box for last name

2. How is this person related to Person 1? Mark  ONE box.

- Relationship options: Opposite-sex husband/wife/spouse, Opposite-sex unmarried partner, Same-sex husband/wife/spouse, Same-sex unmarried partner, Biological son or daughter, Adopted son or daughter, Stepson or stepdaughter, Brother or sister, Father or mother, Grandchild, Parent-in-law, Son-in-law or daughter-in-law, Other relative, Roommate or housemate, Foster child, Other nonrelative

3. What is this person's sex? Mark  ONE box.

- Sex options: Male, Female

4. What is this person's age and what is this person's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.

Age on April 1, 2017 (years) and date of birth (Month, Day, Year) input boxes

5. What is this person's race or ethnicity?

Mark all boxes that apply AND print ethnicities in the spaces below. Note, you may report more than one group.

WHITE - Provide details below.

- Race options: German, Italian, Irish, Polish, English, French

Print, for example, Scottish, Norwegian, Dutch, etc.

Input box for white ethnicity details

HISPANIC, LATINO, OR SPANISH - Provide details below.

- Race options: Mexican or Mexican American, Salvadoran, Puerto Rican, Dominican, Cuban, Colombian

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

Input box for hispanic ethnicity details

BLACK OR AFRICAN AMERICAN - Provide details below.

- Race options: African American, Nigerian, Jamaican, Ethiopian, Haitian, Somali

Print, for example, Ghanaian, South African, Barbadian, etc.

Input box for black or african american ethnicity details

ASIAN - Provide details below.

- Race options: Chinese, Vietnamese, Filipino, Korean, Asian Indian, Japanese

Print, for example, Pakistani, Cambodian, Hmong, etc.

Input box for asian ethnicity details

AMERICAN INDIAN OR ALASKA NATIVE - Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

Input box for american indian or alaska native ethnicity details

MIDDLE EASTERN OR NORTH AFRICAN - Provide details below.

- Race options: Lebanese, Syrian, Iranian, Moroccan, Egyptian, Israeli

Print, for example, Algerian, Iraqi, Kurdish, etc.

Input box for middle eastern or north african ethnicity details

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER - Provide details below.

- Race options: Native Hawaiian, Tongan, Samoan, Fijian, Chamorro, Marshallese

Print, for example, Palauan, Tahitian, Chuukese, etc.

Input box for native hawaiian or other pacific islander ethnicity details

SOME OTHER RACE OR ETHNICITY - Print details.

Input box for some other race or ethnicity details

**Person 2**

**6. On April 1, 2017, was this person enrolled in any American Indian tribe or Alaska Native tribe or village?**

- No, not enrolled
- Yes, enrolled → *Print enrolled tribe(s) or village(s) below.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**7. On April 1, 2017, was this person a shareholder of any Alaska Native regional or village corporation?**

- No, not a shareholder
- Yes, a shareholder → *Print Alaska Native regional or village corporation(s) below.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**8. Does this person usually live or stay somewhere else?**

Mark  all that apply.

- No
- Yes, for college
- Yes, for a military assignment
- Yes, for a job or business
- Yes, in a nursing home
- Yes, with a parent or other relative
- Yes, at a seasonal or second residence
- Yes, in a jail or prison
- Yes, for another reason

→ **If more people were counted in Question 1 on the front page, continue with Person 3 on the next page.**

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1. Print name of

Person 3

First Name

MI

Input boxes for first name and middle initial

Last Name(s)

Input box for last name

2. How is this person related to Person 1? Mark  ONE box.

- Relationship options: Opposite-sex husband/wife/spouse, Opposite-sex unmarried partner, Same-sex husband/wife/spouse, Same-sex unmarried partner, Biological son or daughter, Adopted son or daughter, Stepson or stepdaughter, Brother or sister, Father or mother, Grandchild, Parent-in-law, Son-in-law or daughter-in-law, Other relative, Roommate or housemate, Foster child, Other nonrelative

3. What is this person's sex? Mark  ONE box.

- Sex options: Male, Female

4. What is this person's age and what is this person's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.

Age on April 1, 2017 (years) and date of birth (Month, Day, Year) input boxes

5. What is this person's race or ethnicity?

Mark all boxes that apply AND print ethnicities in the spaces below. Note, you may report more than one group.

WHITE - Provide details below.

- Race options: German, Italian, Irish, Polish, English, French

Print, for example, Scottish, Norwegian, Dutch, etc.

Input box for white ethnicity details

HISPANIC, LATINO, OR SPANISH - Provide details below.

- Race options: Mexican or Mexican American, Salvadoran, Puerto Rican, Dominican, Cuban, Colombian

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

Input box for hispanic ethnicity details

BLACK OR AFRICAN AMERICAN - Provide details below.

- Race options: African American, Nigerian, Jamaican, Ethiopian, Haitian, Somali

Print, for example, Ghanaian, South African, Barbadian, etc.

Input box for black or african american ethnicity details

ASIAN - Provide details below.

- Race options: Chinese, Vietnamese, Filipino, Korean, Asian Indian, Japanese

Print, for example, Pakistani, Cambodian, Hmong, etc.

Input box for asian ethnicity details

AMERICAN INDIAN OR ALASKA NATIVE - Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

Input box for american indian or alaska native ethnicity details

MIDDLE EASTERN OR NORTH AFRICAN - Provide details below.

- Race options: Lebanese, Syrian, Iranian, Moroccan, Egyptian, Israeli

Print, for example, Algerian, Iraqi, Kurdish, etc.

Input box for middle eastern or north african ethnicity details

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER - Provide details below.

- Race options: Native Hawaiian, Tongan, Samoan, Fijian, Chamorro, Marshallese

Print, for example, Palauan, Tahitian, Chuukese, etc.

Input box for native hawaiian or other pacific islander ethnicity details

SOME OTHER RACE OR ETHNICITY - Print details.

Input box for some other race or ethnicity details

**6. On April 1, 2017, was this person enrolled in any American Indian tribe or Alaska Native tribe or village?**

- No, not enrolled
- Yes, enrolled → *Print enrolled tribe(s) or village(s) below.*

**7. On April 1, 2017, was this person a shareholder of any Alaska Native regional or village corporation?**

- No, not a shareholder
- Yes, a shareholder → *Print Alaska Native regional or village corporation(s) below.*

**8. Does this person usually live or stay somewhere else?**

Mark  all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> No                             | <input type="checkbox"/> Yes, with a parent or other relative   |
| <input type="checkbox"/> Yes, for college               | <input type="checkbox"/> Yes, at a seasonal or second residence |
| <input type="checkbox"/> Yes, for a military assignment | <input type="checkbox"/> Yes, in a jail or prison               |
| <input type="checkbox"/> Yes, for a job or business     | <input type="checkbox"/> Yes, for another reason                |
| <input type="checkbox"/> Yes, in a nursing home         |   |

**→ If more people were counted in Question 1 on the front page, continue with Person 4 on the next page.**

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1. Print name of

Person 4

First Name

MI

Input boxes for first name and middle initial

Last Name(s)

Input box for last name

2. How is this person related to Person 1? Mark  ONE box.

- Opposite-sex husband/wife/spouse, Opposite-sex unmarried partner, Same-sex husband/wife/spouse, Same-sex unmarried partner, Biological son or daughter, Adopted son or daughter, Stepson or stepdaughter, Brother or sister, Father or mother, Grandchild, Parent-in-law, Son-in-law or daughter-in-law, Other relative, Roommate or housemate, Foster child, Other nonrelative

3. What is this person's sex? Mark  ONE box.

- Male, Female

4. What is this person's age and what is this person's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.

Age on April 1, 2017 (years), Month, Day, Year of birth

5. What is this person's race or ethnicity?

Mark all boxes that apply AND print ethnicities in the spaces below. Note, you may report more than one group.

WHITE - Provide details below.

- German, Italian, Irish, Polish, English, French

Print, for example, Scottish, Norwegian, Dutch, etc.

Input box for white ethnicity details

HISPANIC, LATINO, OR SPANISH - Provide details below.

- Mexican or Mexican American, Salvadoran, Puerto Rican, Dominican, Cuban, Colombian

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

Input box for hispanic ethnicity details

BLACK OR AFRICAN AMERICAN - Provide details below.

- African American, Nigerian, Jamaican, Ethiopian, Haitian, Somali

Print, for example, Ghanaian, South African, Barbadian, etc.

Input box for black or african american ethnicity details

ASIAN - Provide details below.

- Chinese, Vietnamese, Filipino, Korean, Asian Indian, Japanese

Print, for example, Pakistani, Cambodian, Hmong, etc.

Input box for asian ethnicity details

AMERICAN INDIAN OR ALASKA NATIVE - Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

Input box for american indian or alaska native ethnicity details

MIDDLE EASTERN OR NORTH AFRICAN - Provide details below.

- Lebanese, Syrian, Iranian, Moroccan, Egyptian, Israeli

Print, for example, Algerian, Iraqi, Kurdish, etc.

Input box for middle eastern or north african ethnicity details

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER - Provide details below.

- Native Hawaiian, Tongan, Samoan, Fijian, Chamorro, Marshallese

Print, for example, Palauan, Tahitian, Chuukese, etc.

Input box for native hawaiian or other pacific islander ethnicity details

SOME OTHER RACE OR ETHNICITY - Print details.

Input box for some other race or ethnicity details



**6. On April 1, 2017, was this person enrolled in any American Indian tribe or Alaska Native tribe or village?**

- No, not enrolled
- Yes, enrolled → *Print enrolled tribe(s) or village(s) below.*

\_\_\_\_\_

**7. On April 1, 2017, was this person a shareholder of any Alaska Native regional or village corporation?**

- No, not a shareholder
- Yes, a shareholder → *Print Alaska Native regional or village corporation(s) below.*

\_\_\_\_\_

**8. Does this person usually live or stay somewhere else?**

Mark  all that apply.

- No
- Yes, for college
- Yes, for a military assignment
- Yes, for a job or business
- Yes, in a nursing home
- Yes, with a parent or other relative
- Yes, at a seasonal or second residence
- Yes, in a jail or prison
- Yes, for another reason

→ If more people were counted in Question 1 on the front page, continue with Person 5 on the next page.

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**1. Print name of Person 5**

First Name MI

Last Name(s)

**2. How is this person related to Person 1? Mark  ONE box.**

- |   |  |
|---|--|
| <input type="checkbox"/> Opposite-sex husband/wife/spouse | <input type="checkbox"/> Father or mother              |
| <input type="checkbox"/> Opposite-sex unmarried partner   | <input type="checkbox"/> Grandchild                    |
| <input type="checkbox"/> Same-sex husband/wife/spouse     | <input type="checkbox"/> Parent-in-law                 |
| <input type="checkbox"/> Same-sex unmarried partner       | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter       | <input type="checkbox"/> Other relative                |
| <input type="checkbox"/> Adopted son or daughter          | <input type="checkbox"/> Roommate or housemate         |
| <input type="checkbox"/> Stepson or stepdaughter          | <input type="checkbox"/> Foster child                  |
| <input type="checkbox"/> Brother or sister                | <input type="checkbox"/> Other nonrelative             |

**3. What is this person's sex? Mark  ONE box.**

- Male  Female

**4. What is this person's age and what is this person's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.**

Age on April 1, 2017 Print numbers in boxes.

Age on April 1, 2017 Month Day Year of birth

years

**5. What is this person's race or ethnicity?**

Mark all boxes that apply **AND** print ethnicities in the spaces below. Note, you may report more than one group.

**WHITE** – Provide details below.

- |                                  |                                 |                                  |
|----------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> German  | <input type="checkbox"/> Irish  | <input type="checkbox"/> English |
| <input type="checkbox"/> Italian | <input type="checkbox"/> Polish | <input type="checkbox"/> French  |

Print, for example, Scottish, Norwegian, Dutch, etc.

**HISPANIC, LATINO, OR SPANISH** – Provide details below.

- |  |                                       |                                    |
|--|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Mexican or Mexican American | <input type="checkbox"/> Puerto Rican | <input type="checkbox"/> Cuban     |
| <input type="checkbox"/> Salvadoran                  | <input type="checkbox"/> Dominican    | <input type="checkbox"/> Colombian |

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

**BLACK OR AFRICAN AMERICAN** – Provide details below.

- |   |                                    |                                  |
|---|------------------------------------|----------------------------------|
| <input type="checkbox"/> African American | <input type="checkbox"/> Jamaican  | <input type="checkbox"/> Haitian |
| <input type="checkbox"/> Nigerian         | <input type="checkbox"/> Ethiopian | <input type="checkbox"/> Somali  |

Print, for example, Ghanaian, South African, Barbadian, etc.

**ASIAN** – Provide details below.

- |                                     |                                   |                                       |
|-------------------------------------|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Chinese    | <input type="checkbox"/> Filipino | <input type="checkbox"/> Asian Indian |
| <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Korean   | <input type="checkbox"/> Japanese     |

Print, for example, Pakistani, Cambodian, Hmong, etc.

**AMERICAN INDIAN OR ALASKA NATIVE** – Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

**MIDDLE EASTERN OR NORTH AFRICAN** – Provide details below.

- |                                   |                                   |                                   |
|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Lebanese | <input type="checkbox"/> Iranian  | <input type="checkbox"/> Egyptian |
| <input type="checkbox"/> Syrian   | <input type="checkbox"/> Moroccan | <input type="checkbox"/> Israeli  |

Print, for example, Algerian, Iraqi, Kurdish, etc.

**NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER** – Provide details below.

- |  |                                 |                                      |
|--|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Samoan | <input type="checkbox"/> Chamorro    |
| <input type="checkbox"/> Tongan          | <input type="checkbox"/> Fijian | <input type="checkbox"/> Marshallese |

Print, for example, Palauan, Tahitian, Chuukese, etc.

**SOME OTHER RACE OR ETHNICITY** – Print details.

6. On April 1, 2017, was this person enrolled in any American Indian tribe or Alaska Native tribe or village?

- No, not enrolled
- Yes, enrolled → *Print enrolled tribe(s) or village(s) below.*

7. On April 1, 2017, was this person a shareholder of any Alaska Native regional or village corporation?

- No, not a shareholder
- Yes, a shareholder → *Print Alaska Native regional or village corporation(s) below.*

8. Does this person usually live or stay somewhere else?

Mark  all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> No                             | <input type="checkbox"/> Yes, with a parent or other relative   |
| <input type="checkbox"/> Yes, for college               | <input type="checkbox"/> Yes, at a seasonal or second residence |
| <input type="checkbox"/> Yes, for a military assignment | <input type="checkbox"/> Yes, in a jail or prison               |
| <input type="checkbox"/> Yes, for a job or business     | <input type="checkbox"/> Yes, for another reason                |
| <input type="checkbox"/> Yes, in a nursing home         |   |

→ If more people were counted in Question 1 on the front page, continue with Person 6 on the next page.

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**1. Print name of Person 6**

First Name MI

Last Name(s)

**2. How is this person related to Person 1? Mark  ONE box.**

- |   |  |
|---|--|
| <input type="checkbox"/> Opposite-sex husband/wife/spouse | <input type="checkbox"/> Father or mother              |
| <input type="checkbox"/> Opposite-sex unmarried partner   | <input type="checkbox"/> Grandchild                    |
| <input type="checkbox"/> Same-sex husband/wife/spouse     | <input type="checkbox"/> Parent-in-law                 |
| <input type="checkbox"/> Same-sex unmarried partner       | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter       | <input type="checkbox"/> Other relative                |
| <input type="checkbox"/> Adopted son or daughter          | <input type="checkbox"/> Roommate or housemate         |
| <input type="checkbox"/> Stepson or stepdaughter          | <input type="checkbox"/> Foster child                  |
| <input type="checkbox"/> Brother or sister                | <input type="checkbox"/> Other nonrelative             |

**3. What is this person's sex? Mark  ONE box.**

- Male  Female

**4. What is this person's age and what is this person's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.**

Age on April 1, 2017 Print numbers in boxes.

Month Day Year of birth

years

**5. What is this person's race or ethnicity?**

Mark all boxes that apply **AND** print ethnicities in the spaces below. Note, you may report more than one group.

**WHITE** – Provide details below.

- |                                  |                                 |                                  |
|----------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> German  | <input type="checkbox"/> Irish  | <input type="checkbox"/> English |
| <input type="checkbox"/> Italian | <input type="checkbox"/> Polish | <input type="checkbox"/> French  |

Print, for example, Scottish, Norwegian, Dutch, etc.

**HISPANIC, LATINO, OR SPANISH** – Provide details below.

- |  |                                       |                                    |
|--|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Mexican or Mexican American | <input type="checkbox"/> Puerto Rican | <input type="checkbox"/> Cuban     |
| <input type="checkbox"/> Salvadoran                  | <input type="checkbox"/> Dominican    | <input type="checkbox"/> Colombian |

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

**BLACK OR AFRICAN AMERICAN** – Provide details below.

- |   |                                    |                                  |
|---|------------------------------------|----------------------------------|
| <input type="checkbox"/> African American | <input type="checkbox"/> Jamaican  | <input type="checkbox"/> Haitian |
| <input type="checkbox"/> Nigerian         | <input type="checkbox"/> Ethiopian | <input type="checkbox"/> Somali  |

Print, for example, Ghanaian, South African, Barbadian, etc.

**ASIAN** – Provide details below.

- |                                     |                                   |                                       |
|-------------------------------------|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Chinese    | <input type="checkbox"/> Filipino | <input type="checkbox"/> Asian Indian |
| <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Korean   | <input type="checkbox"/> Japanese     |

Print, for example, Pakistani, Cambodian, Hmong, etc.

**AMERICAN INDIAN OR ALASKA NATIVE** – Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

**MIDDLE EASTERN OR NORTH AFRICAN** – Provide details below.

- |                                   |                                   |                                   |
|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Lebanese | <input type="checkbox"/> Iranian  | <input type="checkbox"/> Egyptian |
| <input type="checkbox"/> Syrian   | <input type="checkbox"/> Moroccan | <input type="checkbox"/> Israeli  |

Print, for example, Algerian, Iraqi, Kurdish, etc.

**NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER** – Provide details below.

- |  |                                 |                                      |
|--|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Samoan | <input type="checkbox"/> Chamorro    |
| <input type="checkbox"/> Tongan          | <input type="checkbox"/> Fijian | <input type="checkbox"/> Marshallese |

Print, for example, Palauan, Tahitian, Chuukese, etc.

**SOME OTHER RACE OR ETHNICITY** – Print details.

Person 6

6. On April 1, 2017, was this person enrolled in any American Indian tribe or Alaska Native tribe or village?

- No, not enrolled
- Yes, enrolled → *Print enrolled tribe(s) or village(s) below.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

7. On April 1, 2017, was this person a shareholder of any Alaska Native regional or village corporation?

- No, not a shareholder
- Yes, a shareholder → *Print Alaska Native regional or village corporation(s) below.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

8. Does this person usually live or stay somewhere else?

Mark  all that apply.

- No
- Yes, for college
- Yes, for a military assignment
- Yes, for a job or business
- Yes, in a nursing home
- Yes, with a parent or other relative
- Yes, at a seasonal or second residence
- Yes, in a jail or prison
- Yes, for another reason

→ If more people were counted in Question 1 on the front page, continue with Person 7 on the next page.

DRAFT



1. Print name of

Person 7

First Name

MI

Input boxes for first name and middle initial

Last Name(s)

Input box for last name

2. How is this person related to Person 1? Mark  ONE box.

- Relationship options: Opposite-sex husband/wife/spouse, Opposite-sex unmarried partner, Same-sex husband/wife/spouse, Same-sex unmarried partner, Biological son or daughter, Adopted son or daughter, Stepson or stepdaughter, Brother or sister, Father or mother, Grandchild, Parent-in-law, Son-in-law or daughter-in-law, Other relative, Roommate or housemate, Foster child, Other nonrelative

3. What is this person's sex? Mark  ONE box.

- Sex options: Male, Female

4. What is this person's age and what is this person's date of birth? For babies less than 1 year old, do not write the age in months. Write 0 as the age.

Age on April 1, 2017 (years) and date of birth (Month, Day, Year) input boxes

5. What is this person's race or ethnicity?

Mark all boxes that apply AND print ethnicities in the spaces below. Note, you may report more than one group.

WHITE - Provide details below.

- Race options: German, Italian, Irish, Polish, English, French

Print, for example, Scottish, Norwegian, Dutch, etc.

Input box for white ethnicity details

HISPANIC, LATINO, OR SPANISH - Provide details below.

- Race options: Mexican or Mexican American, Salvadoran, Puerto Rican, Dominican, Cuban, Colombian

Print, for example, Guatemalan, Spaniard, Ecuadorian, etc.

Input box for hispanic ethnicity details

BLACK OR AFRICAN AMERICAN - Provide details below.

- Race options: African American, Nigerian, Jamaican, Ethiopian, Haitian, Somali

Print, for example, Ghanaian, South African, Barbadian, etc.

Input box for black or african american ethnicity details

ASIAN - Provide details below.

- Race options: Chinese, Vietnamese, Filipino, Korean, Asian Indian, Japanese

Print, for example, Pakistani, Cambodian, Hmong, etc.

Input box for asian ethnicity details

AMERICAN INDIAN OR ALASKA NATIVE - Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Tlingit, etc.

Input box for american indian or alaska native ethnicity details

MIDDLE EASTERN OR NORTH AFRICAN - Provide details below.

- Race options: Lebanese, Syrian, Iranian, Moroccan, Egyptian, Israeli

Print, for example, Algerian, Iraqi, Kurdish, etc.

Input box for middle eastern or north african ethnicity details

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER - Provide details below.

- Race options: Native Hawaiian, Tongan, Samoan, Fijian, Chamorro, Marshallese

Print, for example, Palauan, Tahitian, Chuukese, etc.

Input box for native hawaiian or other pacific islander ethnicity details

SOME OTHER RACE OR ETHNICITY - Print details.

Input box for some other race or ethnicity details

**Person 7**

**6. On April 1, 2017, was this person enrolled in any American Indian tribe or Alaska Native tribe or village?**

- No, not enrolled
- Yes, enrolled → *Print enrolled tribe(s) or village(s) below.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**7. On April 1, 2017, was this person a shareholder of any Alaska Native regional or village corporation?**

- No, not a shareholder
- Yes, a shareholder → *Print Alaska Native regional or village corporation(s) below.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**8. Does this person usually live or stay somewhere else?**

Mark  all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> No                             |   |
| <input type="checkbox"/> Yes, for college               | <input type="checkbox"/> Yes, with a parent or other relative   |
| <input type="checkbox"/> Yes, for a military assignment | <input type="checkbox"/> Yes, at a seasonal or second residence |
| <input type="checkbox"/> Yes, for a job or business     | <input type="checkbox"/> Yes, in a jail or prison               |
| <input type="checkbox"/> Yes, in a nursing home         | <input type="checkbox"/> Yes, for another reason                |

**→ If more people were counted in Question 1 on the front page, continue with Person 8 on the next page.**



Use this section to complete information for the rest of the people you counted in Question 1 on the front page.  
We may call for additional information about them.

**Person 8**

First Name  MI  Last Name(s)

Sex  Male  Female Age on April 1, 2017  years Date of Birth Month  Day  Year of birth  Related to Person 1?  Yes  No

**Person 9**

First Name  MI  Last Name(s)

Sex  Male  Female Age on April 1, 2017  years Date of Birth Month  Day  Year of birth  Related to Person 1?  Yes  No

**Person 10**

First Name  MI  Last Name(s)

Sex  Male  Female Age on April 1, 2017  years Date of Birth Month  Day  Year of birth  Related to Person 1?  Yes  No

**Person 11**

First Name  MI  Last Name(s)

Sex  Male  Female Age on April 1, 2017  years Date of Birth Month  Day  Year of birth  Related to Person 1?  Yes  No

**FOR OFFICIAL USE ONLY**

JIC1  JIC2

**Thank you for completing the 2017 Census Test.**

If your enclosed postage-paid envelope is missing, please mail your completed form to:

U.S. Census Bureau  
National Processing Center  
1201 East 10th Street  
Jeffersonville, IN 47132

If you need help completing this form, call 1-844-330-2020, Sunday through Saturday from 7:00 a.m. to 12:00 a.m. ET. The telephone call is free.

TDD — Telephone display device for the hearing impaired. Call 1-844-467-2020, Sunday through Saturday from 7:00 a.m. to 12:00 a.m. ET. The telephone call is free.

The U.S. Census Bureau estimates that, for the average household, this form will take about 10 minutes to complete, including the time for reviewing the instructions and answers. Send comments regarding this burden estimate or any other aspect of this burden to: Paperwork Reduction Project xxxx-xxxx, U.S. Census Bureau, DCMD-2H174, 4600 Silver Hill Road, Washington, DC 20233. You may e-mail comments to <2020.census.paperwork@census.gov>; use "Paperwork Reduction Project xxxx-xxxx" as the subject.

You are not required to respond to this collection of information if it does not display a valid approval number from the Office of Management and Budget (OMB). The eight-digit OMB number is xxxx-xxxx.