



Special Census Questionnaire

APPLY LABEL HERE

FOR NPC
USE ONLY

SCID

State

County

AA

Tract

Block

ADDED UNIT ADDRESS or ADDRESS CHANGES

Is this an added unit or is there a change to the preprinted address label?

Address Number (example: 5007)

Street or Road Name (example: N Maple Ave)

ZIP Code

Apartment Number/Unit Designation (example: Apt A or Lot 3)

☐

Rural Route

☐

Location Description

Rural Route or Location Description (if applicable)

☐ Yes, added unit → Enter the full address to the right.

☐ Yes, address changes → Enter the full address to the right.

☐ No → Skip to S1.

S1. Hello, I am (name) from the U.S. Census Bureau (show ID). Is this (address)? If respondent says no, ask, "Can you tell me where to find (address)?" and then end interview.

☐ Respondent confirmed address.

S2. Did you or anyone in this household live or stay here on (Special Census Day)?

☐ Yes – I am here to complete a Special Census questionnaire for this address. It should take about 10 minutes. (If you haven't already, hand respondent a confidentiality notice.) This notice explains that your answers are confidential.

☐ No – Skip to S4.

S3. Does someone usually live at this [house/apartment/mobile home], or is this a vacation or seasonal home where no one usually lives?

☐ Usually lives here – Skip to S5.

☐ Vacation or seasonal home or held for occasional use – Skip to "Respondent Information" on Page 8.

S4. On (Special Census Day), was this unit

☐ Occupied by a different household? – Using a knowledgeable respondent, complete this questionnaire for the people occupying the household on (Special Census Day).

☐ Vacant? – Skip to "Respondent Information" on Page 8.

☐ Not a housing unit – Skip to "Respondent Information" on Page 8.

S5. Is this [house/apartment/mobile home]

Mark ☒ ONE box.

☐ Owned by you or someone in this household with a mortgage or loan, including 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?

S6. We need to count people where they live and sleep most of the time. (Hand respondent an Information Sheet.) Please read the WHO TO COUNT section on the Information Sheet. Based on these instructions, how many people were living or staying in this [house/apartment/mobile home] on (Special Census Day)?

Number of people =

S7. Were there any additional people staying here on (Special Census Day) that you did not include in the count in the previous question? For example:

Mark ☒ all that apply. Include any additional people on the person pages.

☐ 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



Person 1

1. Now I am going to ask you questions about each person living here. If there is someone living here who pays the rent or owns this residence, I would like to start by listing him or her as Person 1. If the owner or the person who pays the rent does not live here, I can start by listing any adult living here as Person 1.

What is Person 1's name?

Print name below and verify the spelling.

First Name

MI

Last Name(s)

2. Is Person 1 male or female? Mark ☒ ONE box.

☐

Male

☐

Female

3. What was Person 1's age on (Special Census Day)? What is Person 1's date of birth? If you don't know the exact age, please estimate. For babies less than 1 year old, do not report the age in months. Report 0 as the age.

Print numbers in boxes.

Age on (Special Census Day)

Month

Day

Year of birth

years

→ NOTE: Please answer BOTH the question about Hispanic origin and the question about race. For this census, Hispanic origin is not a race.

4. Please read the HISPANIC ORIGIN section on the Information Sheet.

Is Person 1 of Hispanic, Latino, or Spanish origin?

☐

No, not of Hispanic, Latino, or Spanish origin

☐

Yes, Mexican, Mexican Am., Chicano

☐

Yes, Puerto Rican

☐

Yes, Cuban

☐

Yes, another Hispanic, Latino, or Spanish origin – Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc. ↴

5. Please read the RACE section on the Information Sheet.

What is Person 1's race?

Mark ☒ one or more boxes AND print origins.

☐

White – Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc. ↴

☐

Black or African Am. – Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. ↴

☐

American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. ↴

☐

Chinese

☐

Vietnamese

☐

Native Hawaiian

☐

Filipino

☐

Korean

☐

Samoan

☐

Asian Indian

☒

Japanese

☐

Chamorro

☐

Other Asian – Print, for example, Pakistani, Cambodian, Hmong, etc. ↴

☐

Other Pacific Islander – Print, for example, Tongan, Fijian, Marshallese, etc. ↴

☐

Some other race – Print race or origin. ↴

→ If more people were counted in Question S6 on the front page, continue with Person 2 on the next page.



Person 3

1. What is Person 3's name?

Print name below and verify the spelling.

First Name

MI

Last Name(s)

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

For example – Read the examples to respondent.

Mark ☒ all that apply.

- | | |
|--|--|
| ☐ With a parent or other relative | ☐ In a jail or prison |
| ☐ For college | ☐ At a seasonal or second residence |
| ☐ For a military assignment | ☐ For another reason |
| ☐ For a job or business | ☐ No |
| ☐ In a nursing home | |

3. Please read the RELATIONSHIP section on the Information Sheet.

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

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

4. Is this person male or female? Mark ☒ ONE box.

- ☐ Male ☐ Female

5. What was this person's age on (Special Census Day)? What is this person's date of birth? If you don't know the exact age, please estimate. For babies less than 1 year old, do not report the age in months. Report 0 as the age.

Print numbers in boxes.

Age on (Special Census Day)

Month

Day

Year of birth

years

→ NOTE: Please answer BOTH the question about Hispanic origin and the question about race. For this census, Hispanic origin is not a race.

6. Please read the HISPANIC ORIGIN section on the Information Sheet.

Is this person of Hispanic, Latino, or Spanish origin?

- ☐ No, not of Hispanic, Latino, or Spanish origin
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, another Hispanic, Latino, or Spanish origin – Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc. ↴

7. Please read the RACE section on the Information Sheet. What is this person's race?

Mark ☒ one or more boxes AND print origins.

- ☐ White – Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc. ↴

- ☐ Black or African Am. – Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. ↴

- ☐ American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. ↴

- | | | |
|--|---|--|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian – Print, for example, Pakistani, Cambodian, Hmong, etc. ↴ | ☐ Other Pacific Islander – Print, for example, Tongan, Fijian, Marshallese, etc. ↴ | |

- ☐ Some other race – Print race or origin. ↴

→ If more people were counted in Question S6 on the front page, continue with Person 4 on the next page.



Person 5

1. What is Person 5's name?

Print name below and verify the spelling.

First Name

MI

Last Name(s)

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

For example – Read the examples to respondent.

Mark ☒ all that apply.

- | | |
|--|--|
| ☐ With a parent or other relative | ☐ In a jail or prison |
| ☐ For college | ☐ At a seasonal or second residence |
| ☐ For a military assignment | ☐ For another reason |
| ☐ For a job or business | ☐ No |
| ☐ In a nursing home | |

3. Please read the RELATIONSHIP section on the Information Sheet.

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

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

4. Is this person male or female? Mark ☒ ONE box.

- ☐ Male ☐ Female

5. What was this person's age on (Special Census Day)? What is this person's date of birth? If you don't know the exact age, please estimate. For babies less than 1 year old, do not report the age in months. Report 0 as the age.

Print numbers in boxes.

Age on (Special Census Day)

Month

Day

Year of birth

years

→ NOTE: Please answer BOTH the question about Hispanic origin and the question about race. For this census, Hispanic origin is not a race.

6. Please read the HISPANIC ORIGIN section on the Information Sheet.

Is this person of Hispanic, Latino, or Spanish origin?

- ☐ No, not of Hispanic, Latino, or Spanish origin
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, another Hispanic, Latino, or Spanish origin – Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc. ↴

7. Please read the RACE section on the Information Sheet. What is this person's race?

Mark ☒ one or more boxes AND print origins.

- ☐ White – Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc. ↴

- ☐ Black or African Am. – Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. ↴

- ☐ American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. ↴

- | | | |
|--|---|--|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian – Print, for example, Pakistani, Cambodian, Hmong, etc. ↴ | ☐ Other Pacific Islander – Print, for example, Tongan, Fijian, Marshallese, etc. ↴ | |

- ☐ Some other race – Print race or origin. ↴

→ If more people were counted in Question S6 on the front page, continue with Person 6 on the next page.

Print name below and verify the spelling.

MI

[illegible][illegible]

For example – *Read the examples to respondent.*

☒

- | | |
|--|--|
| ☐ With a parent or other relative | ☐ In a jail or prison |
| ☐ For college | ☐ At a seasonal or second residence |
| ☐ For a military assignment | ☐ For another reason |
| ☐ For a job or business | ☐ No |
| ☐ In a nursing home | |

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

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

☐ Male ☐ Female

Age on (Special Census Day) *Print numbers in boxes.* Month Day Year of birth

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Is this person of Hispanic, Latino, or Spanish origin?

- ☐ No, not of Hispanic, Latino, or Spanish origin
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, another Hispanic, Latino, or Spanish origin – *Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.* ↴

[illegible]

Mark ☒ one or more boxes AND print origins.

- White – Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc. ↗

[illegible]

- Black or African Am. – *Print*, for example, *African American*, *Jamaican*, *Haitian*, *Nigerian*, *Ethiopian*, *Somali*, etc. ↴

[illegible]

- ☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.* ✓

[illegible]

- | | | |
|--|-------------------------------------|---|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian –
<i>Print, for example,
Pakistani, Cambodian,
Hmong, etc.</i> ↴ | | ☐ Other Pacific Islander –
<i>Print, for example,
Tongan, Fijian,
Marshallese, etc.</i> ↴ |

[illegible]

- ☐ Some other race – *Print race or origin.*

[illegible]

7

R1. What is your name? *Print name below and verify the spelling.*

MI

[illegible][illegible][illegible][illegible]Telephone
Number

--	--	--	--

9

1

5

9

1

No

A. Unit Status on (Special Census Day)

9

9

☐

9

[illegible]

 For seasonal, recreational or occasional use

JIC1

JIC2

--	--	--

REP

CO

7

No

Type	Month	Day	Hour	Minute	Outcome
☒ In-Person					☐ a.m.
					☐ p.m.
☐ In-Person					☐ a.m.
☐ Telephone					☐ p.m.
☐ In-Person					☐ a.m.
☐ Telephone					☐ p.m.

OUTCOME CODES: NV = Left Notice of Visit NC = No Contact RE = Refusal CI = Conducted Interview OT = Other

I certify that the entries I have made on this questionnaire are true and correct to the best of my knowledge.

Field Representative's Signature

Employee ID

Month Day Year

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Field Supervisor
Initials

FSA Number

Month Day Year

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