
2000 QUESTIONNAIRE

Census 2000 used two questionnaires—a long-form (sample) and a short-form (100 percent) questionnaire. The short-form questionnaire consisted of 7 questions that could be answered by up to 6 persons within a household (see questions 1-6 and 33 on long-form questionnaire reproduced here). Space was provided to identify 6 additional members of the household. The U.S. Census Bureau would collect data on persons 7-12 by telephone interview.

The long-form questionnaire (pictured here), sent to a sample of households throughout the United States and territories, contained 29 inquiries in addition to the 8 questions asked on the short-form questionnaire. These additional questions, as in the past, collected information on the population, housing, economic, and social characteristics of the Nation's households.

United States Census 2000

U.S. Department of Commerce
Bureau of the Census



This is the official form for all the people at this address. It is quick and easy, and your answers are protected by law. Complete the Census and help your community get what it needs — today and in the future!

The "Informational Copy" shows the content of the United States Census 2000 "long" form questionnaire. Each household will receive either a short form (100-percent questions) or a long form (100-percent and sample questions). The long form questionnaire includes the same 6 population questions and 1 housing question that are on the Census 2000 short form, plus 26 additional population questions, and 20 additional housing questions. On average, about 1 in every 6 households will receive the long form. The content of the forms resulted from reviewing the 1990 census data, consulting with federal and non-federal data users, and conducting tests.

For additional information about Census 2000, visit our website at www.census.gov or write to the Director, Bureau of the Census, Washington, DC 20233.

Start Here

Please use a black or blue pen.

- 1 How many people were living or staying in this house, apartment, or mobile home on April 1, 2000?

Number of people

INCLUDE in this number:

- foster children, roomers, or housemates
- people staying here on April 1, 2000 who have no other permanent place to stay
- people living here most of the time while working, even if they have another place to live

DO NOT INCLUDE in this number:

- college students living away while attending college
- people in a correctional facility, nursing home, or mental hospital on April 1, 2000
- Armed Forces personnel living somewhere else
- people who live or stay at another place most of the time

- ➔ Please turn the page and print the names of all the people living or staying here on April 1, 2000.



If you need help completing this form, call 1-800-XXX-XXXX between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

TDD - Telephone display device for the hearing impaired. Call 1-800-XXX-XXXX between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

¿NECESITA AYUDA? Si usted necesita ayuda para completar este cuestionario llame al 1-800-XXX-XXXX entre las 8:00 a.m. y las 9:00 p.m., 7 días a la semana. La llamada telefónica es gratis.

The Census Bureau estimates that, for the average household, this form will take about 38 minutes to complete, including the time for reviewing the instructions and answers. Comments about the estimate should be directed to the Associate Director for Finance and Administration, Attn: Paperwork Reduction Project 0607-0856, Room 3104, Federal Building 3, Bureau of the Census, Washington, DC 20233.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget.

Form **D-61B**

OMB No. 0607-0856: Approval Expires 12/31/2000

List of Persons

➔ Please be sure you answered question 1 on the front page before continuing.

2 Please print the names of all the people who you indicated in question 1 were living or staying here on April 1, 2000.

Example — Last Name

J O H N S O N

First Name MI

R O B I N J

Start with the person, or one of the people living here who owns, is buying, or rents this house, apartment, or mobile home. If there is no such person, start with any adult living or staying here.

Person 1 — Last Name

First Name MI

Person 2 — Last Name

First Name MI

Person 3 — Last Name

First Name MI

Person 4 — Last Name

First Name MI

Person 5 — Last Name

First Name MI

Person 6 — Last Name

First Name MI

Person 7 — Last Name

First Name MI

Person 8 — Last Name

First Name MI

Person 9 — Last Name

First Name MI

Person 10 — Last Name

First Name MI

Person 11 — Last Name

First Name MI

Person 12 — Last Name

First Name MI

➔ Next, answer questions about Person 1.

FOR OFFICE USE ONLY

A. JIC1

B. JIC2

C. JIC3

D. JIC4

Person

1



Your answers are important! Every person in the Census counts.

1 What is this person's name? Print the name of Person 1 from page 2.

Last Name

 First Name _____ MI _____

2 What is this person's telephone number? We may contact this person if we don't understand an answer.

Area Code + Number
 _____ - _____ - _____

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?

Age on April 1, 2000

 Print numbers in boxes.
 Month Day Year of birth

NOTE: Please answer BOTH Questions 5 and 6.

5 Is this person Spanish/Hispanic/Latino? Mark the "No" box if **not** Spanish/Hispanic/Latino.

No, not Spanish/Hispanic/Latino
 Yes, Mexican, Mexican Am., Chicano
 Yes, Puerto Rican
 Yes, Cuban
 Yes, other Spanish/Hispanic/Latino — Print group. ↗

6 What is this person's race? Mark one or more races to indicate what this person considers himself/herself to be.

White
 Black, African Am., or Negro
 American Indian or Alaska Native — Print name of enrolled or principal tribe. ↗

Asian Indian
 Chinese
 Filipino
 Japanese
 Korean
 Vietnamese
 Other Asian — Print race. ↗

Native Hawaiian
 Guamanian or Chamorro
 Samoan
 Other Pacific Islander — Print race. ↗

Some other race — Print race. ↗

7 What is this person's marital status?

Now married
 Widowed
 Divorced
 Separated
 Never married

8 a. At any time since February 1, 2000, has this person attended regular school or college?

Include only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.

No, has not attended since February 1 → Skip to 9
 Yes, public school, public college
 Yes, private school, private college

Question is asked of all persons on the short (100-percent) and long (sample) forms.



Person 1 (continued)

- 8 b. What grade or level was this person attending?** Mark ONE box.
- Nursery school, preschool
 - Kindergarten
 - Grade 1 to grade 4
 - Grade 5 to grade 8
 - Grade 9 to grade 12
 - College undergraduate years (freshman to senior)
 - Graduate or professional school (for example: medical, dental, or law school)

- 9 What is the highest degree or level of school this person has COMPLETED?** Mark ONE box. If currently enrolled, mark the previous grade or highest degree received.
- No schooling completed
 - Nursery school to 4th grade
 - 5th grade or 6th grade
 - 7th grade or 8th grade
 - 9th grade
 - 10th grade
 - 11th grade
 - 12th grade, **NO DIPLOMA**
 - HIGH SCHOOL GRADUATE** — high school DIPLOMA or the equivalent (for example: GED)
 - Some college credit, but less than 1 year
 - 1 or more years of college, no degree
 - Associate degree (for example: AA, AS)
 - Bachelor's degree (for example: BA, AB, BS)
 - Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
 - Professional degree (for example: MD, DDS, DVM, LLB, JD)
 - Doctorate degree (for example: PhD, EdD)

- 10 What is this person's ancestry or ethnic origin?**
- _____
- _____
- (For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

- 11 a. Does this person speak a language other than English at home?**
- Yes
 - No → Skip to 12

b. What is this language?

(For example: Korean, Italian, Spanish, Vietnamese)

- c. How well does this person speak English?**
- Very well
 - Well
 - Not well
 - Not at all

- 12 Where was this person born?**
- In the United States — Print name of state.

- Outside the United States — Print name of foreign country, or Puerto Rico, Guam, etc.

- 13 Is this person a CITIZEN of the United States?**

- Yes, born in the United States → Skip to 15a
- Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas
- Yes, born abroad of American parent or parents
- Yes, a U.S. citizen by naturalization
- No, not a citizen of the United States

- 14 When did this person come to live in the United States? Print numbers in boxes.**

Year

- 15 a. Did this person live in this house or apartment 5 years ago (on April 1, 1995)?**

- Person is under 5 years old → Skip to 33
- Yes, this house → Skip to 16
- No, outside the United States — Print name of foreign country, or Puerto Rico, Guam, etc., below; then skip to 16.

- No, different house in the United States

Person 1 (continued)

15 b. Where did this person live 5 years ago?

Name of city, town, or post office

Did this person live inside the limits of the city or town?

- Yes
 No, outside the city/town limits

Name of county

Name of state

ZIP Code

16 Does this person have any of the following long-lasting conditions:

- | | Yes | No |
|--|--------------------------|--------------------------|
| a. Blindness, deafness, or a severe vision or hearing impairment? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying? | <input type="checkbox"/> | <input type="checkbox"/> |

17 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:

- | | Yes | No |
|--|--------------------------|--------------------------|
| a. Learning, remembering, or concentrating? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Dressing, bathing, or getting around inside the home? | <input type="checkbox"/> | <input type="checkbox"/> |
| c. (Answer if this person is 16 YEARS OLD OR OVER.) Going outside the home alone to shop or visit a doctor's office? | <input type="checkbox"/> | <input type="checkbox"/> |
| d. (Answer if this person is 16 YEARS OLD OR OVER.) Working at a job or business? | <input type="checkbox"/> | <input type="checkbox"/> |

18 Was this person under 15 years of age on April 1, 2000?

- Yes → Skip to 33
 No

19 a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment?

- Yes
 No → Skip to 20a

b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

- Yes
 No → Skip to 20a

c. How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.

- Less than 6 months
 6 to 11 months
 1 or 2 years
 3 or 4 years
 5 years or more

20 a. Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

- Yes, now on active duty
 Yes, on active duty in past, but not now
 No, training for Reserves or National Guard only → Skip to 21
 No, never served in the military → Skip to 21

b. When did this person serve on active duty in the U.S. Armed Forces? Mark a box for EACH period in which this person served.

- April 1995 or later
 August 1990 to March 1995 (including Persian Gulf War)
 September 1980 to July 1990
 May 1975 to August 1980
 Vietnam era (August 1964—April 1975)
 February 1955 to July 1964
 Korean conflict (June 1950—January 1955)
 World War II (September 1940—July 1947)
 Some other time

c. In total, how many years of active-duty military service has this person had?

- Less than 2 years
 2 years or more

