In strict confidence

1981 Census England

Form for making an Individual Return

Please complete this census form and have it ready for collection as early as possible on the morning of **Monday 6 April 1981**.

This census is being held in accordance with a decision made by Parliament. Completion of this form is compulsory under the Census Act 1920. If you refuse to complete it, or if you give false information, you may have to pay a fine of up to £50.

Your replies will be treated in STRICT CONFIDENCE. They will be used to produce statistics but your name and address will NOT be fed into the census computer. After the census, the forms will be locked away for 100 years before they are passed to the Public Record Office.

When you have completed the form please sign the declaration on the last page.

A R THATCHER
Registrar General

Office of Population Censuses and Surveys
PO Box 200 Portsmouth PO2 8HH
Telephone: 0329-42511

<table>
<thead>
<tr>
<th>To be completed by the Enumerator</th>
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<tbody>
<tr>
<td>Census District</td>
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<tr>
<th>To be completed by the Manager, Chief Resident Officer, Commanding Officer or other person in charge of the Establishment or Vessel</th>
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</thead>
<tbody>
<tr>
<td>Name of establishment or vessel</td>
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<tr>
<td>Address</td>
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</table>

including Postcode

PLEASE TURN OVER
1. Name
Write surname and forename(s) (BLOCK CAPITALS please)
For a baby who has not yet been given a name write 'BABY' and the surname.

Name and surname

2. Sex
Please tick the appropriate box.

Sex
☐ Male  ☐ Female

3. Date of birth
Write the day, month and year of birth.

Date of birth
Day  Month  Year

4. Marital status
Please tick the box showing the present marital status.
If separated but not divorced please tick 'Married (1st marriage)' or 'Re-married' as appropriate.

Marital status
1 ☐ Single
2 ☐ Married (1st marriage)
3 ☐ Re-married
4 ☐ Divorced
5 ☐ Widowed

5. Position in establishment
Please write in your position in this establishment.
For example write 'Guest', 'Patient', 'Inmate', 'Staff', 'Student', 'Boarder', 'Crew', 'Passenger'.
If you are completing the form in a private household, your relationship to the person making the return for the rest of the household should be stated.

Not applicable to this form.

6. Whereabouts on night of 5-6 April 1981

☐ This address
☐ Elsewhere – write your usual address and postcode
Address (BLOCK CAPITALS please)

7. Usual address
If you usually live here please tick 'This address'. If not, tick 'Elsewhere' and write in your usual address.
If you are a student or a schoolchild away from home during term time your home address should be taken as your usual address.

Address (BLOCK CAPITALS please)

8. Usual address one year ago
If your usual address one year ago, on 5 April 1980, was the same as that given in answer to question 7 please tick 'Same'. If not, please tick 'Different' and write in your usual address.
For a child born since 5 April 1980 write 'UNDER ONE'.

Address (BLOCK CAPITALS please)

9. Country of birth
Please tick the appropriate box.

Country of birth
1 ☐ England
2 ☐ Wales
3 ☐ Scotland
4 ☐ Northern Ireland
5 ☐ Irish Republic
6 ☐ Elsewhere. Please write the present name of the country.
Answers to remaining questions are not required for persons under 16 years of age (born after 5 April 1965)

10 Whether working, retired, housewife, etc last week
Please tick all boxes appropriate to your activity last week.

- 1 In a full-time job at any time last week
- 2 In a part-time job at any time last week
- 3 Waiting to take up a job already accepted
- 4 Seeking work
- 5 Prevented by temporary sickness from seeking work
- 6 Permanently sick or disabled
- 7 Housewife
- 8 Wholly retired from employment
- 9 Student at an educational establishment not provided by an employer
- 0 Other, please specify

Questions about present or previous employment
If you were in a job last week please answer questions 11-15 in respect of the main job during the week.
If you were wholly retired
If you were out of work last week
If you were prevented from working because of permanent sickness or disablement please answer questions 11-13 in respect of the most recent full-time job, if any. Leave questions 14 and 15 blank.
If you are not in any of the categories above or have not had a previous job please write 'Not applicable' at question 11 and leave questions 12-15 blank.

11 Name and business of employer (if self-employed the name and nature of the person's business)

| a | Name of employer |
| b | Nature of business |

12 Occupation

| a | Occupation |
| b | Description of work |

Notes for Armed Forces, civil servants and local government officers

**Armed Forces**
If you are a member of the Armed Forces - write 'ARMED FORCES' at 11a; if you are a member of the Armed Forces of a country other than the UK - add the name of the country.

At 12a give your rank or rating only.
Questions 11b, 12b and 13 should not be answered.

**Civil servants**
If you are a civil servant - give the name of your Department at 11a, write 'GOVERNMENT DEPARTMENT' at 11b and 'CIVIL SERVANT' at 12a.

At 12b for a non-industrial civil servant - give your rank or grade only.
At 12b for an industrial civil servant - give your job title only.

**Local government officers**
If you are a local government officer or other public official - give the name of the local authority or public body at 11a and the branch in which you are employed at 11b.
At 12a give your rank or grade and complete 12b.

Question 16 should be answered if you are aged 18 or over

PLEASE TURN OVER
13 Employment status
Please tick the appropriate box.
Box 3 should be ticked if you have management or supervisory responsibility for other employees.
Box 2 should be ticked if you are employed as a quality control inspector and concerned only with the technical quality of a product.

14 Address of place of work
Please give the full address of your place of work.
If you are employed on a site for a long period give the address of the site.
If you do not work regularly at one place and report daily to a depot or other fixed address, give that address.

If you do not report daily to a fixed address tick box 1.
If you work mainly at home tick box 2.

15 Daily journey to work
Please tick the appropriate box to show how the longest part, by distance, of your daily journey to work is normally made.
Car or van includes three-wheeled cars and motor caravans.

16 Degrees, professional and vocational qualifications
Have you obtained any qualifications after the age of 18 such as:
Degrees, Diplomas, HNC, HND,
Nursing qualifications, Teaching qualifications,
Graduate or corporate membership of professional institutions,
Other professional, educational or vocational qualifications?
Exclude qualifications normally obtained at school, such as GCE, CSE and School Certificates.
If box 2 is ticked write in all qualifications even if they are not relevant to your present job or if you are not working.
Please list the qualifications in the order in which they were obtained.
Write for each qualification:
The title
the major subject or subjects
the year obtained and
the awarding institution
If more than four, please enter in the space top right.

Declaration
This form is correctly completed to the best of my knowledge and belief.

Signature

Date ......................... April 1981