## 1980 Questionnaire

A separate questionnaire (a 10" X 11" booklet), containing both population and housing items, was used for each household, and completed by a respondent.

### Table 1

<table>
<thead>
<tr>
<th>Person on Page 1</th>
<th>Person on Page 2</th>
<th>Person on Page 3</th>
<th>Person on Page 4</th>
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<tbody>
<tr>
<td>First name</td>
<td>Last name</td>
<td>Sex</td>
<td>Age</td>
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### Table 2

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<th>Person on Page 10</th>
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<th>Person on Page 12</th>
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<tr>
<td>Education level</td>
<td>Occupation</td>
<td>Income</td>
<td>Housing situation</td>
<td>Housing type</td>
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### Table 3

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<th>Person on Page 14</th>
<th>Person on Page 15</th>
<th>Person on Page 16</th>
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<td>Age of onset of</td>
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<td>Housing situation</td>
<td>Housing type</td>
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</table>
11. In what State or foreign country was this person born? Print the State where this person’s mother was living when this person was born. Do not give the location of the hospital unless the mother’s home and the hospital were in the same State.

12. If this person was born in a foreign country —
   a. Is this person a naturalized citizen of the United States?
      ■ Yes, a naturalized citizen
      ■ No, not a citizen
      ■ Born abroad of American parents
   b. When did this person come to the United States to stay?
      ■ 1970 to 1974
      ■ 1960 to 1964
      ■ Before 1960

13a. Does this person speak a language other than English at home?
   ■ Yes  0  No, only speaks English — Skip to 14

   b. What is this language?

   (Example — Chinese, Italian, Spanish, etc.)

14. What is this person’s ancestry? If uncertain about how to report ancestry, see instruction guide.

   (For example: Afro-American, English, French, German, Hungarian, Irish, Italian, Jamaican, Korean, Lebanese, Mexican, Nigerian, Polish, Ukrainian, Venezuelan, etc.)

15a. Did this person live in this house five years ago
   (April 1, 1975)?
      ■ Yes  0  No, different house

   b. Where did this person live five years ago (April 1, 1975)?
      ■ State, foreign country, Puerto Rico, Guam, etc.:  

      (2) County:  

      (3) City, town, village, etc.:  

      (4) Inside the incorporated (legal) limits of that city, town, village, etc.:
      ■ Yes  0  No, in unincorporated area

16. When was this person born?
   ■ Born before April 1965 — Please go on with questions 17-33
   ■ Born April 1965 or later — Turn to next page for next person

17. In April 1975 (five years ago) was this person —
   a. On active duty in the Armed Forces?
      ■ Yes  0  No
   b. Attending college?
      ■ Yes  0  No
   c. Working at a job or business?
      ■ Yes, full time  0  No
      ■ Yes, part time

18a. Is this person a veteran of active-duty military service in the United States?
   If service was in National Guard or Reserves only, see instruction guide.
   ■ Yes  0  No — Skip to 19

   b. Was active-duty military service during —
      ■ Fill a circle for each period in which this person served.
      ■ May 1975 or later
      ■ Vietnam (August 1964—April 1975)
      ■ February 1955—July 1964
      ■ Korean conflict (June 1950—January 1955)
      ■ World War II (September 1940—July 1947)
      ■ Any other time

19. Does this person have a physical, mental, or other health condition which has lasted for 6 or more months and which:
   a. Limits the kind or amount of work this person can do at a job?  0  0  0  0  0
   b. Prevents this person from working at a job?  0  0  0  0  0
   c. Limits or prevents this person from using public transportation?  0  0  0  0  0

20. If this person is a female —
   a. How many babies has she ever had, not counting stillbirths?  0  0  0  0  0  0  0  0  0
   b. Do not count her stepchildren or children she has adopted.
   c. If married more than once — Did the first marriage end because of the death of the husband (or wife)?
      ■ Yes  0  No

22a. Did this person work at any time last week?
   ■ Yes — Fill this circle if this person worked full time or part time. (Count part-time work such as delivering papers, or helping without pay in a family business or farm. Also count active duty in the Armed Forces.)
   ■ No — Fill this circle if this person did not work, or did only own housework, school work, or volunteer work.

23. At what location did this person work last week?
   (at all jobs)
   Subtract any time off, add overtime or extra hours worked.
   ■ Hours

24a. Last week, how long did it usually take this person to get from home to work (one way)?
   ■ Minutes

25a. How did this person usually get to work last week?
   If this person used more than one method, give the one usually used for most of the distance.
   ■ Car
   ■ Taxi/cab
   ■ Truck
   ■ Motorcycle
   ■ Van
   ■ Bicycle
   ■ Bus or streetcar
   ■ Railroad
   ■ Subway or elevated
   ■ Other — Specify

FOR CENSUS USE ONLY
1980 Questionnaire

Name of Person 1
on page 2:

11. In what State or foreign country was this person born?

Print the State where this person's mother was living when this person was born. Do not give the location of the hospital unless the mother's home and the hospital were in the same State.

Name of State or foreign country; or Puerto Rico, Guam, etc.

12. Is this person a veteran of active duty military service in the Armed Forces of the United States?

Yes, a naturalized citizen
No, not a citizen
Born abroad of American parents

b. When did this person come to the United States to stay?

1975 to 1980
1965 to 1969
1950 to 1959
1970 to 1974
1960 to 1964
Before 1950

13a. Does this person speak a language other than English at home?

Yes
No, only speaks English

b. What is this language?

(For example, Chinese, Italian, Spanish, etc.)

14. What is this person's ancestry? If uncertain about how to report ancestry, see instruction guide.

(For example, Afro-Amer., English, French, German, Hungarian, Irish, Italian, Jewish, Korean, Lithuanian, Mexican, Nigerian, Urubalians, Venezuelan, etc.)

15a. Did this person live in this house five years ago (April 1, 1975)?

If in college or Armed Forces in April 1975, report place of residence there.

b. Where did this person live five years ago (April 1, 1975)?

(1) State, foreign country, Puerto Rico, Guam, etc.: 

(2) County:

(3) City, town, village, etc.:

(4) Inside the incorporated (legal) limits of that city, town, village, etc.:

Yes
No, in unincorporated area

16. When was this person born?

Born before April 1965
Born April 1965 or later

17. In April 1975 (five years ago) was this person —

a. On active duty in the Armed Forces?

Yes
No

b. Attending college?

Yes
No

c. Working at a job or business?

Yes, full time
No
Yes, part time

18a. Is this person a veteran of active duty military service in the Armed Forces of the United States?

Yes
No — Skip to 19

b. Was active-duty military service during —

Fill a circle for each period in which this person served.

May 1945 or later
February 1955—July 1964
January 1950—June 1955
World War II (September 1940—July 1947)
World War I (April 1917—November 1918)

Any other time

19. Does this person have a physical, mental, or other health condition which has lasted for 6 or more months and which . . .

a. Limits the kind or amount of work this person can do at a job...

Yes
No

b. Prevents this person from working at a job...

Yes
No

c. Limits or prevents this person from using public transportation...

Yes
No

20. If this person is a female —

How many babies has she ever had, not counting stillbirths?

Do not count her stepchildren 7 8 9 10 11 12 or

more

21. If this person has ever been married —

a. Has this person been married more than once?

Yes
No

b. Month and year of marriage

Month, Year

22a. Did this person work at any time last week?

Yes — Fill this circle if this person worked full time or part time.

No — Fill this circle if this person did not work, or if this person did work, but did only housework, school work, or volunteer work.

b. How many hours did this person work last week (at all jobs)?

Subtract any time off, add overtime, or extra hours worked.

23. At what location did this person work last week?

If this person worked at more than one location, print where he or she worked most last week.

If one location cannot be specified, see instruction guide.

a. Address (Number and street)

(If street address is not known, enter the building name, shopping center, or other physical location description.)

b. Name of city, town, village, borough, etc.

c. Is the place of work inside the incorporated (legal) limits of that city, town, village, borough, etc.?

Yes
No, in unincorporated area

d. County

24. Last week, how long did it usually take this person to get from home to work (one way)?

Minutes

24a. How did this person usually get to work last week?

If this person used more than one method, give the one usually used for most of the distance.

a. Car

Taxicab

b. Truck

Motorcycle

b. Van

Bicycle

b. Bus or streetcar

Walked only

b. Railroad

Worked at home

b. Subway or elevator

Other — Specify

If car, truck, or van in 24b, go to 24c.

Otherwise, skip to 28.
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</table>

Please turn to the next page and answer the questions for Person 2 on page 2.
### PERSON in column 7

<table>
<thead>
<tr>
<th>Field name</th>
<th>Middle initial</th>
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</table>

If relative of person in column 1:
- Husband/| Father/mother |
- Son/daughter | Other relative |
- Brother/sister | Other relative 
- Roomer, boarder | Other relative |
- Partner, roommate | Other relative |
- Paid employee | Other relative |

- Male | Female |
- White | Asian Indian |
- Black or Negro | Hawaiian |
- Japanese | Guamanian |
- Chinese | Samoan |
- Filipino | Eskimo |
- Korean | Auck |
- Vietnamese | Other — Specify |
- Indian (Am.) | Other |

#### a. Age at last birthday
- 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |

#### b. Month of birth
- Jan = Jan. |
- Feb = Feb. |
- Mar = Mar. |
- Apr = Apr. |
- May = May. |
- June = June |
- July = July |
- Aug = Aug |
- Sept = Sept |
- Oct = Oct. |
- Nov = Nov |
- Dec = Dec |

- Now married | Separated |
- Widowed | Never married |

- Po box| Spanish/Hispanic |
- Yes, Mexican, Mexican-American, Chicano |
- Yes, Puerto Rican |
- Yes, Cuban |
- Yes, other Spanish/Hispanic |

- No, has not attended since February 1 |
- Yes, public school, public college |
- Yes, private, church-related |
- Yes, private, non-church-related |

#### Highest grade attended:
- Nursery school | Kindergarten |
- Elementary through high school (grade or year) |
- High school (grade or year) |
- College (academic year) |
- Never attended school — Skip question 10 |

- Now attending this grade (or year) |
- Finished this grade (or year) |

#### CENSUS USE ONLY
- A | B | C | D |

### FOR CENSUS USE ONLY

#### Block number
- 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |

#### Serial number
- 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |

#### Type of unit or quarters
- Occupied |
- First form |
- Continuation |

#### Occupant
- Year-round use |
- Seasonal/Mig. — Skip C2 |
- Vacancy status |
- Regular |
- Usual home |
- Other vacant quarters |

#### FOR CENSUS USE ONLY
- C1 is this unit for— |
- Yes | No |

#### Blocks
- Less than 1 month |
- 1 to 2 months |
- 2 to 6 months |
- 6 months or more |

#### Blocks
- Less than 1 month |
- 1 to 2 months |
- 2 to 6 months |
- 6 months or more |

#### Indicators
- 1 | 2 | 3 |

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**NOW PLEASE ANSWER QUESTIONS H1 – H12 FOR YOUR HOUSEHOLD**

**H1. Did you leave anyone out of Question 1 because you were not sure if the person should be listed — for example, a new baby still in the hospital, a lodger who also has another home, or a person who stays here once in a while and has no other home?**
- Yes | No |

**H2. Did you list anyone in Question 1 who is away from home now — for example, on a vacation or in a hospital?**
- Yes | No |

**H3. Is anyone visiting here who is not already listed?**
- Yes | No |

**H4. How many living quarters, occupied and vacant, are at this address?**
- One |
- 2 apartments or living quarters |
- 3 apartments or living quarters |
- 4 apartments or living quarters |
- 5 apartments or living quarters |
- 6 apartments or living quarters |
- 7 apartments or living quarters |
- 8 apartments or living quarters |
- 9 apartments or living quarters |
- 10 or more apartments or living quarters |
- This is a mobile home or trailer |

**H5. Do you enter your living quarters —**
- Directly from the outside or through a common or public hall |
- Through someone else's living quarters |

**H6. Do you have complete plumbing facilities in your living quarters, that is, hot and cold piped water, a flushing toilet, and a bathtub or shower?**
- Yes for this household only |
- Yes, but also used by another household |
- No, but some but not all plumbing facilities |
- No plumbing facilities in living quarters |

**H7. How many rooms do you have in your living quarters?**
- 1 room |
- 2 rooms |
- 3 rooms |
- 4 rooms |
- 5 rooms |
- 6 rooms |
- 7 rooms |
- 8 rooms |
- 9 rooms |
- 10 or more rooms |

**H8. Are your living quarters —**
- Owned or being bought by you or by someone else in this household |
- Rent for cash rental |
- Occupied without payment of cash rental |

**H9. Is this apartment (house) part of a condominium?**
- No |
- Yes, condominium |

**H10. If this is a one-family house —**
- Is the house on a property of 10 or more acres? |
- Yes | No |
- Any part of the property used as a commercial establishment or medical office? |
- Yes | No |

**H11. If you live in a one-family house or a condominium unit which you own or are buying —**
- What is the value of this property, that is, how much do you think this property (house and lot or condominium unit) would sell for if it were for sale? |
- Less than $10,000 |
- $10,000 to $14,999 |
- $15,000 to $19,999 |
- $20,000 to $24,999 |
- $25,000 to $29,999 |
- $30,000 to $39,999 |
- $40,000 to $49,999 |
- $50,000 or more |

**H12. If you pay rent for your living quarters —**
- What is the monthly rent? |
- Less than $50 |
- $50 to $99 |
- $100 to $199 |
- $200 to $499 |
- $500 to $999 |
- $1,000 to $1,999 |
- $2,000 to $4,999 |
- $5,000 or more |

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88 Measuring America
U.S. Census Bureau
1980 Questionnaire

FOR YOUR HOUSEHOLD

Please answer H30–H32 if you live in a one-family house which you own or are buying, unless this is —

- A mobile home or trailer
- A house on 10 or more acres
- A condominium unit
- A house with a commercial establishment or medical office on the property

If any of these, or if you rent your unit or this is a multi-family structure, skip H30 to H32 and turn to page 6.

H30. What were the real estate taxes on this property last year?

$ ____________________ 00 OR ○ None

H31. What is the annual premium for fire and hazard insurance on this property?

$ ____________________ 00 OR ○ None

H32a. Do you have a mortgage, deed of trust, contract to purchase, or similar debt on this property?

○ Yes, mortgage, deed of trust, or similar debt
○ Yes, contract to purchase
○ No — Skip to page 6

b. Do you have a second or junior mortgage on this property?

○ Yes ○ No

 FOR CENSUS USE ONLY

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H31. What is the annual premium for fire and hazard insurance on this property?

$ ____________________ 00 OR ○ None

d. Does your regular monthly payment (amount entered in H32c) include payments for real estate taxes on this property?

○ Yes, taxes included in payment
○ No, taxes paid separately or taxes not required

e. Does your regular monthly payment (amount entered in H32c) include payments for fire and hazard insurance on this property?

○ Yes, insurance included in payment
○ No, insurance paid separately or no insurance

Please turn to page 6

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U.S. Census Bureau