

**CONFIDENTIAL**

SECTION I

**EASTERN CARIBBEAN RI  
POPULATION C**

(One Schedule to be completed for

County/Parish/Quarter.....  
 Ward (if applicable).....  
 Enumeration District Number.....  
 Type of Area.....  
 Schedule Number.....  
 No. of Rooms.....  
 Address of Household/Building.....


FOR OF

No. of Families or Domestic Units.....

No. of Persons per Room.....

Type of Household.....

Town/District/Locality

TYPE OF CARD	SECTION II					SECTION III				
	Surname and main Christian Name	Relationship	Sex	Age Last Birthday <small>yrs. and months as fractions of a year for children under 2 years of age</small>	Race or Ethnic Origin <small>N W I CH M P A C S O</small>	Religion <small>enter as stated by respondents</small>	Birthplace <small>If in this town/locality write 'here'  If elsewhere in this territory give town or locality and name of nearest town.  If abroad, give name of country only.</small>	Normal Residence <small>If in this town/locality write 'here'  If elsewhere give town/locality and name of nearest town.  <b>NOTE!</b> For persons born abroad, normal residence is where they normally live in this Territory.</small>	Years of Residence <small>If local born length of stay in present residence  If Foreign born length of stay in this territory</small>	Highest of Edu. Attai <small>incl. child at sch Std. 1 t S.C N.S. U.I U.I E.F No</small>
INDIVIDUAL NO.	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
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01										
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INDIVIDUAL NO.	R E M A R K S

