APPENDIX E.
Facsimile of Questionnaire Pages

1990 CENSUS OF POPULATION AND HOUSING
COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

INTERROGATION
• FOR LIST/ENUMERATE AREAS (PERSONAL VISIT)

Hello, my name is (Your name) and I'm an official census taker for the 1990 Census of the Commonwealth of the Northern Mariana Islands. This is my identification (PAUSE) and here's some information about the purpose of my visit (Give respondent copy of Privacy Act Notice). For the average household, this interview should take about 44 minutes.

NEXT:
Ask the questions at the top of the listing page.
Complete a form for each housing unit.

FOR CENSUS USE

A1. DO code 3600
A2. Unit ID
A3. ARA
A4. Block
B. Map spot
C. Form type

D. Population
E. Type of Unit
Occupied
3 □ First Form
4 □ Continuation
Vacant
1 □ Regular
2 □ P/F

F1. Complete after
1 □ LR
3 □ MV
5 □ TC
7 □ P6
9 □ SM
2 □ P/F
4 □ ED
6 □ RE
8 □ IA
0 □ P1

F2. Coverage
1 □ 1b
2 □ 1a

G. Address — Number, street, apartment number or location description

Enumeration form number
Enumerators' signature
Date

Crew leader's initials
Date
CLD number

NOTES

FACSIMILE OF QUESTIONNAIRE PAGES E-1
The 1990 census must count every person at his or her "usual residence." This means the place where the person lives and sleeps most of the time.

Include

- Everyone who usually lives here such as family members, housemates and roommates, foster children, roomers, boarders, and live-in employees
- Persons who are temporarily away on a business trip, on vacation, or in a general hospital
- College students who stay here while attending college
- Persons in the Armed Forces who live here
- Newborn babies still in the hospital
- Children in boarding schools below the college level
- Persons who stay here most of the week while working even if they have a home somewhere else
- Persons with no other home who are staying here on April 1

Do NOT Include

- Persons who usually live somewhere else
- Persons who are away in an institution such as a prison, mental hospital, or a nursing home
- College students who live somewhere else while attending college
- Persons in the Armed Forces who live somewhere else
- Persons who stay somewhere else most of the week while working

1a. Please give me the name of each person living here on Sunday, April 1, including all persons staying here who have no other home. If EVERYONE is staying here temporarily and usually lives somewhere else, give me the name of each person. Begin with the household member in whose name the home is owned, being bought, or rented. If there is no such person, start with any adult household member.
Print last name, first name, and middle initial for each person.

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1b. If EVERYONE listed above is staying here only temporarily and usually lives somewhere else, mark (X) this box and ask — Where do these people usually live?
DO NOT PRINT THE ADDRESS LISTED IN ITEM G ON THE FRONT COVER.

House number
Street or road/Rural route and box number
Apartment number

City/Village
State or Territory/Island
ZIP Code

County or foreign country
Names of nearest intersecting streets or roads
H1a. When you told me the names of persons living here on April 1, did you leave anyone out because you were not sure if the person should be listed — for example, someone temporarily away on a business trip or vacation, a newborn baby still in the hospital, or a person who stays here once in a while and has no other home?

1 □ Yes — Determine if you should add the person(s) based on the instructions for Question 1a on page 1.

2 □ No

b. When you told me the names of persons living here on April 1, did you include anyone even though you were not sure that the person should be listed — for example, a visitor who is staying here temporarily or a person who usually lives somewhere else?

1 □ Yes — Determine if you should delete the person(s) based on the instructions for Question 1a on page 1.

2 □ No

H2. Which best describes this building? Include all apartments, flats, etc., even if vacant.

1 □ A mobile home or trailer

2 □ A one-family house detached from any other house

3 □ A one family house attached to one or more houses

6 □ A building with 2 apartments

7 □ A building with 3 or 4 apartments

9 □ A building with 5 to 9 apartments

10 □ A building with 10 to 19 apartments

11 □ A building with 20 to 49 apartments

12 □ A building with 50 or more apartments

13 □ Other

H3. When did (person 1 listed in line 1 of question 1a on page 1) move into this (house/apartment)?

1 □ 1989 or 1990

2 □ 1985 to 1988

3 □ 1980 to 1984

4 □ 1970 to 1979

5 □ 1960 to 1969

6 □ 1959 or earlier

H4. What is the MAIN type of material used for the outside walls of this building? Read each category and mark (X) ONE box.

1 □ Poured concrete

2 □ Concrete blocks

3 □ Metal

4 □ Wood

5 □ Other

6 □ No walls

H5. What is the MAIN type of material used for the roof of this building? Read each category and mark (X) ONE box.

1 □ Poured concrete

2 □ Metal

3 □ Wood

4 □ Thatch

5 □ Other

H6. What is the MAIN type of material used for the foundation of this building?

1 □ Concrete

2 □ Wood pier or pilings

3 □ Other

H7. About when was this building first built?

1 □ 1989 or 1990

2 □ 1985 to 1988

3 □ 1980 to 1984

4 □ 1970 to 1979

5 □ 1960 to 1969

6 □ 1950 to 1959

7 □ 1940 to 1949

8 □ 1939 or earlier

9 □ Don’t know

H8. How many rooms do you have in this house/apartment? Count living rooms, dining rooms, kitchens, and bedrooms, but do NOT count bathrooms, basements, attics, or garages.

1 □ 1 room

2 □ 2 rooms

3 □ 3 rooms

4 □ 4 rooms

5 □ 5 rooms

6 □ 6 rooms

7 □ 7 rooms

8 □ 8 rooms

9 □ 9 or more rooms

H9. How many bedrooms do you have, that is, how many bedrooms would you list if this house/apartment were on the market for sale or rent?

0 □ No bedroom

1 □ 1 bedroom

2 □ 2 bedrooms

3 □ 3 bedrooms

4 □ 4 bedrooms

5 □ 5 or more bedrooms

H10a. Do you have hot and cold piped water?

1 □ Yes, in this unit

2 □ Yes, in this building

3 □ No, only cold piped water in this unit

4 □ No, only cold piped water in this building

5 □ No, only cold piped water outside this building

6 □ No piped water

b. What type of energy does your water heater use most?

1 □ Electricity

2 □ Gas

3 □ Solar

4 □ Other fuels
ALSO ASK THESE QUESTIONS FOR THIS HOUSEHOLD

H22. Is this house/apartment:
Read box and mark (X) ONE box.
1 □ Owned by you or someone in this household with a mortgage or loan?
2 □ Owned by you or someone in this household free and clear (without a mortgage)?
3 □ Rented for cash rent?
4 □ Occupied without payment of cash rent?

H23. What is the monthly rent?
If rent is NOT PAID BY THE MONTH, see your job instructions on how to figure a monthly rent.

$ _______ .00
Monthly amount — Dollars

Ask only if RENT IS PAID for this house/apartment —

H24. Is this a ONE-FAMILY HOUSE —

□ Yes
□ No

INTERVIEWER INSTRUCTION:
Ask questions H25 to H30 if this is a one-family house, a condominium, or a mobile home, that someone in
this household OWNS OR IS BUYING; otherwise, go to page 5.

H25. What is the value of this property; that is, how much do you think this property (house and lot/condominium unit) would sell for if it
were for sale?

$ _______ .00
Value of property — Dollars

H26. What were the real estate taxes on THIS property last year?

$ _______ .00
Yearly amount — Dollars

OR

□ None

H27. What was the annual payment for fire, hazard,
and flood insurance on THIS property?

□ $ _______ .00
Yearly amount — Dollars

OR

□ None

H28a. Is there a mortgage, deed of trust, contract
to purchase, or similar debt on THIS property?

□ Yes, mortgage, deed of trust,
□ Yes, contract to purchase
□ No — Skip to H29a

Go to H29b

H28b. How much is the regular monthly mortgage,
payment on THIS property? Include payments only on first mortgage or contract to purchase.

□ $ _______ .00
Monthly amount — Dollars

OR

□ None

H29. Is there a second or junior mortgage or a home equity loan on THIS property?

□ Yes
□ No — Go to page 5 and ask population questions for Person 1 listed on line 1.

H30. What is the monthly condominium fee?

□ $ _______ .00
Monthly amount — Dollars

Ask ONLY if this is a CONDOMINIUM

□ No regular payment required — Skip to H29a

Go to page 5 and ask population questions for
Person 1 listed on line 1 of question 1a on page 1.

FOR ENUMERATOR USE

□ 1. Vacancy status
□ 2. Is this unit boarded up?
□ 3. Months vacant

□ 1 □ For rent
□ 2 □ For sale only
□ 3 □ Rented or sold, not occupied
□ 4 □ For other reason(s)
□ 5 □ For migrant
□ 6 □ Other vacant

□ 1 □ Yes
□ 2 □ No

□ 1 □ Less than 1
□ 2 □ 1 to 2
□ 3 □ 2 to 6
□ 4 □ 6 up to 12
□ 5 □ 12 up to 24
□ 6 □ 24 or more
**PERSON 1**

1. **Last name**
2. **First name**
   - **Middle initial**

2. **HOUSEHOLDER**
   - **START** with the household member (or one of the members) in whose name the house is owned, being bought, or rented. This should be the first person listed in question 1 on page 1.
   - If there is no such person, start with any adult household member.

3. Is . . . male or female?
   - Mark (X) ONE box.
   - [ ] Male
   - [ ] Female

4. **What is . . . 's ethnic origin or race?**
   - Print no more than two groups.

   For example: Chamorro, Samoan, White, Black, Carolinian, Filipino, Japanese, Kosal, Panamanian, Tongan, and so on.

5. **Age and year of birth.**
   - a. How old is . . . ? (Age should be as of April 1, 1950.) If unknown, any age or place gives me your best estimate.
   - Print the age in the boxes.
   - [ ] Age

   b. In what year was . . . born?
   - Print the year of birth in the boxes.
   - [ ] Year of birth

6. Is . . . now married, widowed, divorced, separated, or has . . . ever been married? Mark (X) ONE box.
   - [ ] Married
   - [ ] Widowed
   - [ ] Divorced
   - [ ] Separated
   - [ ] Never married

7. Where was . . . born?
   - Print the name of the island, U.S. State, or foreign country in the space below.

8. **If the answer to question 7 appears in one of the first two “Yes” categories listed below, mark (X) the appropriate “Yes” category. Otherwise, ask—**
   - Is . . . a CITIZEN or NATIONAL of the United States?
     - [ ] Yes
     - [ ] No

   b. Is . . . born in area — Skip to 10

   c. Yes, born in the United States or another U.S. Territory or Commonwealth
     - [ ] Yes
     - [ ] No

   d. Yes, born elsewhere in U.S. parent or parents
     - [ ] Yes
     - [ ] No

   e. Yes, U.S. citizen by naturalization
     - [ ] Yes
     - [ ] No

   f. Yes, U.S. citizen or national (permanent resident)
     - [ ] Yes
     - [ ] No

   g. Yes, U.S. citizen or national (temporary residence)
     - [ ] Yes
     - [ ] No

9. When did . . . come to this area to stay? If returned the area more than once, ask — What is the latest year?
   - [ ] Year

10. At any time since February 1, 1996, has . . . attended regular school or college? Include only pre-kindergarten, kindergartens, elementary school, and schooling which leads to a high school diploma or a college degree.
   - [ ] Yes — Public or private
   - [ ] No
   - Has not attended since February 1
   - [ ] Yes, public school, public college
   - [ ] Yes, private school, private college

11a. **How much school has . . . COMPLETED?**
   - Read categories in person is unsure. Mark (X) ONE box for the highest grade completed or degree received. If currently enrolled, mark the previous grade attended or highest degree received.
   - Mark (X) ONE box.
   - [ ] No school completed
   - [ ] Pre-kindergarten
   - [ ] Kindergarten
   - [ ] Grades 1-11
     - [ ] 1st
     - [ ] 2nd
     - [ ] 3rd
   - [ ] 12th grade, NO DIPLOMA
   - [ ] HIGH SCHOOL GRADUATE - high school DIPLOMA or the equivalent (For example: GED)
   - [ ] Some college but no degree
   - [ ] Associate degree in college - Occupational program
   - [ ] Associate degree in college - Academic program
   - [ ] Bachelor's degree (For example: BA, AB, BS)
   - [ ] Master's degree (For example: MA, MS, MEng, Med, MSW, MBA)
   - [ ] Professional school degree (For example: ND, DDS, DVM, LLB, JD)
   - [ ] Doctorate degree (For example: PhD, EdD)

12a. Where was . . . father born?
   - Print the name of the island, U.S. State, or foreign country in the space below.

12b. Where was . . . mother born?
   - Print the name of the island, U.S. State, or foreign country in the space below.

13a. Is . . . a dependent of an active-duty or retired member of the Armed Forces of the United States or of the full-time military Reserves or National Guard?
   - "Active duty" does NOT include training for the military Reserves or National Guard.
   - [ ] Yes
     - [ ] No
     - [ ] Yes, dependent of active-duty member of the Armed Forces
     - [ ] Yes, dependent of retired member of the Armed Forces or dependent of an active-duty or retired member of full-time National Guard or Armed Forces Reserve
     - [ ] No

14a. If the person was born after April 1, 1955, mark (X) box without asking 14a, and go to the next person.
   - [ ] Yes — Skip to 15a

   b. What is the name of the island, U.S. State, or foreign country where . . . lived 5 years ago? (as of April 1, 1955)
   - [ ] Yes
   - [ ] No

   c. If outside this area, print the answer above and skip to 15a.

15a. Does . . . know how to read and write in any language?
   - [ ] Yes
     - [ ] No

   b. Does . . . speak a language other than English at home?
   - [ ] Yes
     - [ ] No

   c. What is this language?
   - [ ] Yes
     - [ ] No

   For example: Chamorro, Samoan, Carolinian

16. **INTERVIEWER CHECK ITEM** — Mark (X) based on question 5.
   - 1 Born before April 1, 1975 — Go to 17a
   - 2 Born after April 1, 1975 or later — Go to questions for the next person

17a. Has . . . ever been on active-duty military service in the Armed Forces of the United States?
   - "Active duty" does NOT include training for the military Reserves or National Guard.
   - [ ] Yes
     - [ ] No

17b. Has . . . ever been in the United States military Reserve or National Guard?
   - [ ] Yes
     - [ ] No

17c. Did . . . serve on active duty during — Read each category and mark (X) each box for which the answer is "Yes."
   - 1 September 1950 or later
   - 2 May 1975 to August 1980
   - 3 Vietnam era (August 1964 — April 1975)
   - 4 February 1955 — August 1964
   - 5 Korean conflict (June 1950 — January 1955)
   - 6 World War II (September 1940 — July 1947)
   - 7 World War I (April 1917 — November 1918)
   - 8 Any other time

18. Does . . . have a physical, mental, or other health condition that has lasted for 6 or more months and which —
   - Limits the kind or amount of work . . . can do at a job?
     - [ ] Yes
     - [ ] No

   b. Prevents . . . from working at a job?
     - [ ] Yes
     - [ ] No

19. Because of a health condition that has lasted for 6 or more months, have . . . difficulty—
   - a. Going outside the home alone, for example, to shop or visit a doctor's office?
     - [ ] Yes
     - [ ] No

   b. Taking care of his or her personal needs, such as driving, dressing, or getting around inside the home?
     - [ ] Yes
     - [ ] No

20. If this person is a female, ask—
   - How many babies has . . . ever had, not counting stillbirths? Do not count stillbirths or children . . . has adopted.
   - [ ] None
     - [ ] 1
     - [ ] 2
     - [ ] 3
     - [ ] 4
     - [ ] 5 or more

21a. Did . . . work at any time LAST WEEK, either full time or part time? Work includes any work such as delivering papers, or helping without pay in a family business or farm; it also includes active duty in the Armed Forces. Work does NOT include own household, school work, or volunteer work. Subsistence activity includes baking, growing crops, etc., NOT primarily for commercial purposes.
   - Read each category and mark (X) one box that applies.
   - [ ] Yes, worked full time or part time at a job or business AND did NOT subsistence activity
     - [ ] Yes
     - [ ] No

   b. Yes, worked full time or part time at a job or business AND did subsistence activity
     - [ ] Yes
     - [ ] No

   c. Yes, did subsistence activity only
     - [ ] Yes
     - [ ] No

21b. If did not work (off did only own household, school work, or volunteer work)
   - [ ] Yes
     - [ ] No

   b. How many hours did . . . work LAST WEEK at all jobs, excluding subsistence activity? Subtract any time off and add any overtime or extra hours worked.
     - [ ] Hours
22. Where did . . . usually work LAST WEEK? Exclude substance activity. If . . . worked at more than one location, list all locations below.
Where did . . . work most last week?
If outside the area for example, another territory, commonwealth, or country, skip to 25a.

-  

-  

b. What is the name of the territory, commonwealth, U.S. State, or foreign country where . . . worked?

-  

23a. What type of transportation did . . . usually use to get to work LAST WEEK? Exclude transportation to substance activity. If more than one mode of transportation was used, record the one used for most of the distance.

- Car, truck, or private van/bus
- Public van/bus
- Bus
- Taxi
- Motorcycle
- Bicycle
- Walked
- Worked at home — Skip to 28
- Other method

Ask only if “car, truck, or private van/bus” is marked in 25a.

b. How many people, including . . . usually rode to work together LAST WEEK?

- 5 or 6 people
- 12 people
- 3 people
- 8 people
- 10 or more people

24a. What time did . . . usually leave home to go to work LAST WEEK? “Usually” means on most days last week.

- 1 a.m.
- 2 a.m.

24b. How many minutes did it usually take . . . to get from home to work LAST WEEK?

- Minutes — Skip to 28

25. Was . . . on layoff from a job or business LAST WEEK?

- Yes, on layoff
- Yes, on vacation, temporary illness, labor dispute, etc.
- No

26a. Has . . . been looking for work to earn money during the last 4 weeks?

- Yes
- No — Skip to 27

26b. Could . . . have taken a job LAST WEEK if one had been offered?

- Yes, already has a job
- Yes, temporarily ill
- No, other reasons (in school, etc.)
- Yes, could have taken a job

27. When did . . . last work at a job, business, or farm, even for a few days?

- 1990
- 1989
- 1988
- 1985 to 1987
- 1980 to 1984
- 1979 or earlier
- Never worked; or did substance only

28-30. The following questions ask about the job worked last week. If . . . had more than one job, describe the one . . . worked the most hours. If . . . didn’t work, the questions refer to the most recent job or business since 1985.

28a. For whom did . . . work?

If now on active duty in the Armed Forces or full-time military Reserve or National Guard, mark (X) this box — 1 ☐ and print the branch of service. If not the Armed Forces, print the name of company, business, or other employer.

-  

b. What kind of business or industry was this?

-  

For example: hospital, fish canning, retail bakery.

29a. What kind of work was . . . doing?

-  

For example: registered nurse, industrial machinery mechanic, cake loyer.

b. What were . . . most important activities or duties?

-  

For example: patient care, repair machinery in factory, icing cakes.

30. Was . . . an experienced . . . Read item Mark (X) ONE box.

- Employee of a PRIVATE FOR PROFIT company or business or of an individual, for wages, salary, or commission.
- Employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization.
- Local or territorial GOVERNMENT employee (territorial/commonwealth, etc.)
- Federal GOVERNMENT employee.
- SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or firm.
- SELF-EMPLOYED in own INCORPORATED business, professional practice, or firm.
- Working WITHOUT PAY in family business or farm.

31a. Last year (1989), did . . . work, even for a few days, at a paid job or in a business or farm, excluding substance activity?

- Yes
- No — Skip to 32


- Weeks

32. The following questions are about income received during 1989.

If an exact amount is not known, accept a best estimate. If net income in c, e, or question 33 was a loss, write “Loss” above the dollar amount.

a. Did . . . earn income from wages, salary, commissions, bonuses, or tips? Report amount before deductions for taxes, bonds, dues, or other taxes.

- Yes — How much?
- No — Annual amount — Dollars

b. Did . . . earn any income from (his/her) own farm or nonfarm business, proprietorship, or partnership? Report net income after business expenses.

- Yes — How much?
- No — Annual amount — Dollars

c. Did . . . receive any interest, dividends, net rental or royalty income, or income from estates and trusts? Include even small amounts credited to an account.

- Yes — How much?
- No — Annual amount — Dollars

d. Did . . . receive any Social Security or Railroad Retirement payment? Include payments to retired workers, dependent children, and to disabled workers.

- Yes — How much?
- No — Annual amount — Dollars

e. Did . . . receive any income from government programs for Supplemental Security Income (SSI), Aid to Families with Dependent Children (AFDC), or other public assistance or public welfare payments?

- Yes — How much?
- No — Annual amount — Dollars

f. Did . . . receive any income from retirement, survivor, or disability payments? Include payments from companies, unions, Federal, State, and local governments, and the U.S. military. Do NOT include Social Security.

- Yes — How much?
- No — Annual amount — Dollars

g. Did . . . receive any remittances? Include money from relatives outside the household or in the military.

- Yes — How much?
- No — Annual amount — Dollars

33. Do not ask this question if 26a through 32b are complete. Instead, sum these entries and enter the amount below.

-  

What was . . . total income in 1989?

-  

Please turn to the next page and ask the questions for Person 2 listed on line 2 of question 1a. If this is the last person listed in question 1a on page 1, go to page 19.
INTERVIEWER INSTRUCTIONS:

Be sure you have recorded —

1. Information in items A3, A4, B, D, E, F1 (when necessary), G and H on the front cover of the questionnaire.
2. The respondent's name in item I and the respondent's telephone number (if any) in item J on the front cover of the questionnaire.
3. Your signature (name) and the date under item O on the front cover of the questionnaire.

Also, be sure you have —

4. Completed as many of the census questions as possible, including the last resort questions.
5. Completed the FOR ENUMERATOR USE section on page 4, for vacant units only.
6. Entered the required Information on the address listing page in the address register and on the ARA map.
7. Written all entries legibly.

Now, ask the Agriculture Screener —

AGRICULTURE SCREENER FOR 1990 CENSUS QUESTIONNAIRE

1. Does anyone living in this household operate a farm?
   - Yes — Skip to agriculture report
   - No — Continue

2. Does this place have 15 or more poultry (chickens, ducks, etc.)?
   - Yes — Skip to agriculture report
   - No — Continue

3. Does this place have 5 or more livestock (cattle, hogs, etc.)?
   - Yes — Skip to agriculture report
   - No — Continue

4. Does this place have any crops (include nursery plants) or vegetables harvested for sale?
   - Yes — Skip to agriculture report
   - No — Continue

5. Does this place have any fruit, nut or tree crops harvested for sale?
   - Yes — Skip to agriculture report
   - No — End the interview

ENUMERATOR — If this household is on a farm, but you are unable to contact the farm operator OR the house is vacant, find out the name and address/location (if different) of the person to contact regarding the operation.

Operator

Address/Location