



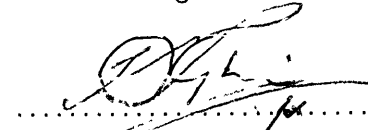
1979 CENSUS - CAYMAN ISLANDS

"I" Form for Individual Return

Please complete this form and have it ready by Monday 8th. October 1979 when your Enumerator will call for its collection.

The information you give on the form will be treated as 'CONFIDENTIAL'. No information will be passed by the Statistics Office to any other Government Department or any other Authority or person.

The legal obligation to fill in this form rests with you and that it is your duty under the law not to give false statements.



 Statistician

TO BE COMPLETED BY ENUMERATOR			
Census District	Enumeration No.	Form No.	Serial No.
Name and Address of Establishment or Household.			

Where Boxes are provided please answer by putting a tick in the Box against the appropriate answer.

<p>B. 1 Write Given Names and Surname</p>	<p>B. 5 Write either Single, Married, Widowed or Divorced as appropriate. If separated and not divorced write Married.</p>	<p>B. 9 Write Trade or Profession, giving Professional qualifications and degrees obtained, i.e. Lawyer, Accountant, Mason, Carpenter, etc.</p>																		
<p>B. 2 Write date of Birth</p> <p>Day Month Year</p>	<p>B. 6 Write Country of Birth.</p>	<p>B. 10 Are you a British Subject, Citizen of the United Kingdom and Colonies. Please tick the appropriate Box.</p> <p>1. <input type="checkbox"/> Through possession of or eligibility for a British passport with rights of domicile in the United Kingdom.</p> <p>2. <input type="checkbox"/> Because of birth in the Cayman Islands of Caymanian parent or parents.</p> <p>3. <input type="checkbox"/> Through naturalisation. If so give date of naturalisation and certificate No.</p> <p>Date..... Certificate No.....</p> <p>4. <input type="checkbox"/> Through registration as a British Subject, Citizen of the United Kingdom and Colonies.</p>																		
<p>B. 3 For resident Cayman Islanders only. Please tick the appropriate Box of the district your Mother was living before you were born.</p> <table style="width: 100%;"> <tr><td>1. <input type="checkbox"/></td><td>George Town</td></tr> <tr><td>2. <input type="checkbox"/></td><td>Savannah</td></tr> <tr><td>3. <input type="checkbox"/></td><td>Breakers</td></tr> <tr><td>4. <input type="checkbox"/></td><td>North Side</td></tr> <tr><td>5. <input type="checkbox"/></td><td>East End</td></tr> <tr><td>6. <input type="checkbox"/></td><td>Bodden Town</td></tr> <tr><td>7. <input type="checkbox"/></td><td>West Bay</td></tr> <tr><td>8. <input type="checkbox"/></td><td>Cayman Brac</td></tr> <tr><td>9. <input type="checkbox"/></td><td>Little Cayman</td></tr> </table>	1. <input type="checkbox"/>		George Town	2. <input type="checkbox"/>	Savannah	3. <input type="checkbox"/>	Breakers	4. <input type="checkbox"/>	North Side	5. <input type="checkbox"/>	East End	6. <input type="checkbox"/>	Bodden Town	7. <input type="checkbox"/>	West Bay	8. <input type="checkbox"/>	Cayman Brac	9. <input type="checkbox"/>	Little Cayman	<p>B. 7 If the person usually lives here write 'Here' if not write the persons usual address.</p>
1. <input type="checkbox"/>	George Town																			
2. <input type="checkbox"/>	Savannah																			
3. <input type="checkbox"/>	Breakers																			
4. <input type="checkbox"/>	North Side																			
5. <input type="checkbox"/>	East End																			
6. <input type="checkbox"/>	Bodden Town																			
7. <input type="checkbox"/>	West Bay																			
8. <input type="checkbox"/>	Cayman Brac																			
9. <input type="checkbox"/>	Little Cayman																			
<p>B. 4 Please write sex of person. M for male, F for female.</p>	<p>B. 8 If you are a Caymanian tick the appropriate Box.</p> <p>1. <input type="checkbox"/> Born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Born of two Caymanian parents outside the Cayman Islands.</p> <p>4. <input type="checkbox"/> Born of one Caymanian parent outside the Cayman Islands.</p>																			

B. 11

If you hold a Gainful Occupation Licence: Then give following answers.

NOTE: A Civil Servant recruited from overseas should answer 1 and 2 as though holding a Gainful Occupation Licence, entering his years of service in the Cayman Islands in the Box of question 1.

- 1. Enter into the Box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence.
- 3. What is your usual Country of Residence.

B. 12

Do you possess Foreign Nationality or are you a British Subject, Citizen of a Commonwealth Country. If so answer by placing a tick in Box appropriate.

Are you a Foreign National in addition to being a British Subject, Citizen of

- 1. The United Kingdom and Colonies. If so also write in Box the Nationality which you hold.

Are you a British Subject, Citizen of a Commonwealth Country as well as being a British Subject, Citizen of

- 2. The United Kingdom and Colonies. If so also write in Box the Commonwealth Country.

Are you a Foreign National with only permission (A) to enter and

- 3. Reside (B) Granted permanent residence or (C) Gainful Occupation Licence.

- A. Permit to enter and reside
- B. Permanent residential permit
- C. Gainful Occupation Licence

If answer is 'A' complete below

Date of entry

Date when permission ends.....

B. 13

Means of transport to and from place of work. Please tick appropriate Box.

- 1. By Car
 - 2. By Taxi
 - 3. By Motorcycle
 - 4. By Bus
 - 5. By other means (give details)
- (5)

B. 14

Did you have a job last week. Tick appropriate Box.

1. Yes	<input type="checkbox"/>	In a job last week
2. No	<input type="checkbox"/>	Seeking work
3. No	<input type="checkbox"/>	Because of sickness
4. No	<input type="checkbox"/>	total disability
5. No	<input type="checkbox"/>	Wholly retired

B. 15

How are you employed. Tick appropriate Box.

- 1. Employing others or self employed
- 2. Employee monthly paid
- 3. Employee weekly paid
- 4. Unemployed
- 5. Retired

B. 16

Write name and address of present Employer (stating type of business) and number of hours normally worked each week.

.....No. of hours normally worked.

B. 17

Education please complete for all persons 4 years to 18 years of age, who are attending full time schooling. (In the case of 'O' and 'A' levels give subjects).

- 1 Name of School _____
- 2 Grade or Form _____
- 3 CSE's and other Exams _____
- 4 GCE 'O' levels _____
- 5 GCE 'A' levels _____

B. 18

'Full Time' Students 17 years and over. Give details of School/College, Address, The Subjects studying, and also if you possess a scholarship from (g) Government (o) Other sources.

B. 19

Part Time Students 14 years and over. Give details of School and Subjects studying.

B. 20

Have you been granted Caymanian Status. If so tick appropriate Box and give date when Caymanian Status was granted.

- 1. Yes
- 2. No
- 3. Date

B. 21

Do you possess Caymanian Status by right, (i.e., by vested right, by force of law).

- 1. Yes
- 2. No

B. 22

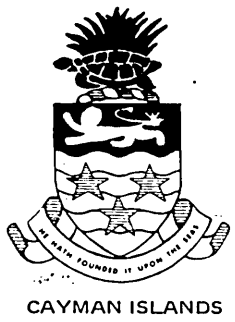
I certify that the answers given by me are correct to the best of my knowledge and belief.

Signed.....

Write Name in Block Capital

.....

Date



1979 CENSUS - CAYMAN ISLANDS

C.1

“ ‘H’ Form for Private Households ”

A household comprises EITHER one person living alone or a group of persons (who may or may not be related) living at the same address with common housekeeping.

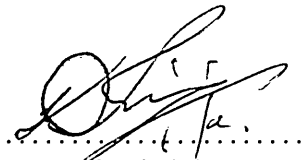
TO THE HEAD (OR ACTING HEAD) OF THE HOUSEHOLD.

Please complete this form and have it ready for collection on Tuesday 9th October 1979. If you need help, do not hesitate to ask the enumerator.

The Enumerator may ask you any questions necessary to help him complete or correct the form.

The information you give on the form will be treated as 'CONFIDENTIAL'. No information will be passed by the Statistics Office to any other Government Department or any other authority or person.

The Legal obligation to fill in the whole form rests with you, and each person required on this form, must give his or her information.


.....
Statistician

TO BE COMPLETED BY THE ENUMERATOR			
District No	Enumeration No	Form No.	Enumerators Name
Name of householder and full postal address			
Type of property and if hot/cold water supply			
If sharing with another household number of rooms shared _____			

PLEASE TAKE NOTE: IT IS YOUR DUTY UNDER THE LAW NOT TO GIVE FALSE STATEMENTS ON THIS FORM

Part A	<p>Answer questions A. 1 to A. 6 about your household's accommodation and then answer questions B. 1 to B. 22 overleaf and if appropriate answer questions C. 1 to C. 7.</p>	<p>Where boxes are provided answer by putting a tick against the appropriate answer, for example if the answer is "Yes".</p> <p style="text-align: right;">Yes <input checked="" type="checkbox"/></p>
<p>A. 1 How do you and your household occupy your accommodations.</p> <p>1. <input type="checkbox"/> As owner occupier (including purchase by mortgage)</p> <p>2. <input type="checkbox"/> By renting from Government</p> <p>3. <input type="checkbox"/> By unfurnished letting from a private Landlord or Company or Housing Association.</p> <p>4. <input type="checkbox"/> As a furnished letting-if in some other way give details.</p>		
<p>A. 2 Does your household share with any one else the use of any room, hall, passage or landing or staircase.</p> <p>1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO</p>		
<p>A. 3 Does your household have a garage.</p> <p style="text-align: center;">ATTACHED UNATTACHED</p> <p>1. <input type="checkbox"/> YES 3. <input type="checkbox"/> YES</p> <p>2. <input type="checkbox"/> NO 4. <input type="checkbox"/> NO</p>		
<p>A. 4 How many cars and vans are owned by you and other members of your household.</p> <p>1. CARS <input type="text"/></p> <p>2. VANS <input type="text"/></p> <p>3. MOTORCYCLES <input type="text"/></p> <p>4. MOPEDS <input type="text"/></p> <p>Include any provided by your employers for your use, but exclude VANS used solely for the carriage of goods. IF NONE WRITE NONE _____</p>		
<p>A. 5 How many rooms are there in your household's accommodation (write in box)</p> <p>1. <input style="width: 100px;" type="text"/></p> <p>Do not count Kitchens, Toilets or Bathrooms. NOTE a room divided by a sliding door or fixed screen count as two rooms. A room divided by a curtain, of beads etc or portable screen count as one room.</p>		
<p>A. 6 Has your household the use of the following.</p> <p>COOKING STOVE (if other means specify)</p> <p>A. 1 <input type="checkbox"/> For use by this household</p> <p>2 <input type="checkbox"/> For use also by another household</p> <p>3 <input type="checkbox"/> No Specify _____</p>		
<p>Kitchen with Sink permanently connected to a Water supply and waste pipe.</p> <p>B. 1 <input type="checkbox"/> For use by this household</p> <p>2 <input type="checkbox"/> For use also by another household.</p> <p>3 <input type="checkbox"/> No.</p>		
<p>Fixed bath or shower permanently connected to a water supply and waste pipe.</p> <p>C. 1 <input type="checkbox"/> For use by this household</p> <p>2 <input type="checkbox"/> For use also by another household</p> <p>3 <input type="checkbox"/> No</p>		
<p>Toilet facilities</p> <p>D. 1 <input type="checkbox"/> Inside flushed</p> <p>2 <input type="checkbox"/> Outside flushed</p> <p>3 <input type="checkbox"/> No facilities</p>		
<p>Ventilation</p> <p>E. 1 <input type="checkbox"/> Fully airconditioned</p> <p>2 <input type="checkbox"/> Partial airconditioned</p> <p>3 <input type="checkbox"/> Fans only</p> <p>4 <input type="checkbox"/> Other means (detail) :</p> <p>5 <input type="checkbox"/> No</p>		

Part B.

Complete A line in part B for every person present on Census night who usually lives at and in this household. Include all those persons who are temporary absent, i.e. Seamen at sea, attending School/College overseas, on nightwork, on vacation, etc. The Enumerator will help you if in doubt. Use Block Capitals for all questions.

<p>B.1 Fill in this column first for every person in the household Write Name and Surname Begin with the head of the household (1st Person) For a Baby who has not yet be given a name write Baby and Surname.</p>	<p>B.2 Write Date of Birth.</p>			<p>B.3 For Resident Cayman Islanders only. Please tick the appropriate Box of the District your Mother was living before you were born.</p>	<p>B.4 Write the sex of the person M for male F for Female</p>	<p>B.5 Write head for head of household and relationship to the head for each of the other persons. i.e. Wife, Son, Daughter, Grandfather, Grandmother, Uncle, Aunt, Sister, Brother, Nephew, Niece, Grandson, Granddaughter, Son in-law, Daughter-in-law, Visitor, Boarder, paying Guest, etc. Note if 'Adopted' write adopted even if the person is formally adopted or not, and give also name of person responsible for the person so adopted.</p>
1st Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		
2nd Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		
3rd Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		
4th Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		
5th Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		
6th Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		
7th Person	Day	Mth	Year	1. <input type="checkbox"/> George Town 7. <input type="checkbox"/> West Bay 2. <input type="checkbox"/> Savannah 8. <input type="checkbox"/> Cayman 3. <input type="checkbox"/> Breakers <input type="checkbox"/> Brac 4. <input type="checkbox"/> Northside 9. <input type="checkbox"/> Little 5. <input type="checkbox"/> East End <input type="checkbox"/> Cayman 6. <input type="checkbox"/> Bodden Town		

<p>B. 6</p> <p>Write either Single Married Widowed Divorced</p> <p>If separated and not divorced write married.</p>	<p>B. 7</p> <p>Write Country of Birth.</p>	<p>B. 8</p> <p>If the person usually lives here write 'here' if not write the persons usual address.</p> <p>Read notes above to give correct answers.</p>	<p>B. 9</p> <p>If you are a Caymanian tick the appropriate Box.</p> <p>This question means Caymanian at Birth.</p>	<p>B. 10</p> <p>Write Trade or profession, giving professional qualifications and degrees obtained. i.e, Lawyer, Accountant, Mason Carpenter, Pilot, Automechanic,etc.</p>
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	
			<p>1. <input type="checkbox"/> Yes, born of two Caymanian parents in the Cayman Islands.</p> <p>2. <input type="checkbox"/> Yes, born of one Caymanian parent in the Cayman Islands.</p> <p>3. <input type="checkbox"/> Yes, born of two Caymanian parents out- side the Cayman Islands</p> <p>4. <input type="checkbox"/> Yes, born of one Caymanian parent out- side the Cayman Islands</p>	

Part B.

Complete A line in part B for every person present on Census night who usually lives at and in this household. Include all those persons who are temporary absent, i.e. Seamen at sea, attending School/College overseas, on nightwork, on vacation, etc. The Enumerator will help you if in doubt. Use Block Capitals for all questions.

B.1 Fill in column first every person in household
Write Name Surname
Begin with the f of the househo. (1st Person)
For a Baby who not yet be give name write Bat and Surname.

B. 11

Are you a British Subject Citizen of the United Kingdom and Colonies?

Please tick appropriate box below.

B. 12

If you hold a Gainful Occupation Licence, then give following answers:
NOTE: A Civil Servant recruited from overseas should answer 1 and 2 as though holding a Gainful Occupation Licence entering his years of service in the Cayman Islands in the Box in question 1.

1st Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

2nd Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

3rd Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

4th Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

5th Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

6th Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

7th Person

- 1. Yes With possession of or eligibility for a British passport with rights of domicil in the United Kingdom.
- 2. Yes Because of birth in the Cayman Islands of Caymanian Parent or Parents.
- 3. Yes Through naturalisation. If so give date of naturalisation and certificate No.
Date Certificate No.
- 4. yes Through registration as a British Subject Citizen of the United Kingdom and Colonies.

- 1. Enter into the box in figures the number of years here.
- 2. How many other members of your family hold a Gainful Occupation Licence?
- 3. What is your usual Country of residence?

B. 14

Means of transport To and From place of work. Please tick appropriate Box.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

B. 15

Did the person have a job last week?. Tick the appropriate Box.

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

B. 16

How are you employed?. Tick the appropriate Box.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

- 1. By Car
- 2. By Taxi
- 3. By Motorcycle
- 4. By Bus
- 5. By other (give details).

- 1. Yes In a job last week
- 2. No Seeking work
- 3. No Because of sickness.
- 4. No Due to total disability.
- 5. No Wholly retired.

- 1. Employing others, and self employed.
- 2. Employee monthly paid.
- 3. Employee weekly paid.
- 4. Unemployed.
- 5. Retired.

B. 17

Write Name and Address of present Employer (stating type of business) and number of hours normally worked each week.

NOTE: Civil servants state your Department and address of establishment.

Normal weekly hours _____

Normal weekly hours _____

Normal weekly hours _____

Normal weekly hours _____

Normal weekly hours _____

Normal weekly hours _____

Normal Weekly hours _____

B. 18

EDUCATION: Please complete for all persons age 4 years to 18 years of age who are at present attending full time schooling.

In the case of 'O' and 'A' levels give Subjects.

B. 19

'Full Time' Students 17 years and over
Give details of School/ College, Address, the Subjects studying, and also if you possess a scholarship from (g) Government(o) Other sources.

B. 20

Students 'Part Time' age 14 years and over. Give details of school and subjects studying

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

1. Name of School
2. Grade or Form
3. C.S.E.'s and other Exams
4. G.C.E. 'O' levels
5. G.C.E. 'A' levels

B. 21

Have you been granted Caymanian Status if so please tick appropriate Box and give date when Caymanian Status was granted.

- 1. Yes
- 2. No
- 3. Date

- 1. Yes
- 2. No
- 3. Date

- 1. Yes
- 2. No
- 3. Date

- 1. Yes
- 2. No
- 3. Date

- 1. Yes
- 2. No
- 3. Date

- 1. Yes
- 2. No
- 3. Date

- 1. Yes
- 2. No
- 3. Date

B. 22

Do you possess Caymanian Status by right (i.e. by vested right, by force of law).

- 1. Yes
- 2. No

- 1. Yes
- 2. No

- 1. Yes
- 2. No

- 1. Yes
- 2. No

- 1. Yes
- 2. No

- 1. Yes
- 2. No

- 1. Yes
- 2. No

TO BE COMPLETED BY THE HOUSEHOLDER

I certify that the answers given by me and members of my household are correct to the best of my knowledge and belief, and that no person or persons have been omitted.

Signed Householder

Date



1979 CENSUS - CAYMAN ISLANDS

'V' Form for use by Visitors/Tourists

THIS FORM MUST BE COMPLETED BY EVERY VISITOR/TOURIST RESIDENT ON CENSUS NIGHT 8TH OCTOBER 1979

V.1 Please write Given Names and Surname for each member of your family visiting the Cayman Islands with you.	V.2 Please write Date of Birth for each person and sex. Write M for Male F for female.			V.3 Please write your permanent address giving City, County, State and Country.	V.4 Please write your Occupation, Trade or Vocation.	V.5 Please write Date of entry into Cayman Islands.	V.6 Please write Date of expected departure from Cayman Islands.
1st Person	Day	Month	Year				
	Sex						
2nd Person	Day	Month	Year				
	Sex						
3rd Person	Day	Month	Year				
	Sex						
4th Person	Day	Month	Year				
	Sex						
5th Person	Day	Month	Year				
	Sex						

Signed

Date.....