

Step-by-Step Guide to Filling in Your Census 2022 Form



CENSUS
3 APRIL 2022
www.census.ie



An
Phríomh-Oifig
Staidrimh

Central
Statistics
Office





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**Plain
English**

Approved by NALA

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What is the 'Step-By-Step Guide to Filling in Your Census 2022 Form'?

The Step-by-Step-Guide to Filling in Your Census 2022 Form gives information to help you fill in your census form. The Central Statistics Office (CSO) acknowledges and appreciates the assistance of NALA in compiling this Guide.

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1. Questions and answers about the census

What is the census?

The census takes place every five years, on a single night in April called census night. This year census night is **Sunday 3 April**.

On this night, everyone in the country fills out their census forms and gives information about themselves, their family, their work, their school, along with information about where they live – their house or apartment.

April						
Mon	Tue	Wed	Thur	Fri	Sat	Sun
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

What is it for?

The census tells us how many people there are in Ireland and where they live, how old they are, and what they work at.

This helps us to answer such important questions as:

- Where will we need new schools, and when will we need them?
- Where will we need new healthcare facilities, like hospitals and nursing homes?
- What changes will we need in our transport services, like new bus stops?

What types of questions are asked?

All of the questions are explained in this guide. To answer most questions, you just tick a box, or sometimes you write in your answer.

Any adult in your home on census night can fill out the form for everyone else in your home.

Whose information should I include on my census form?

Everyone who stays in your home on census night must be included. This includes visitors.

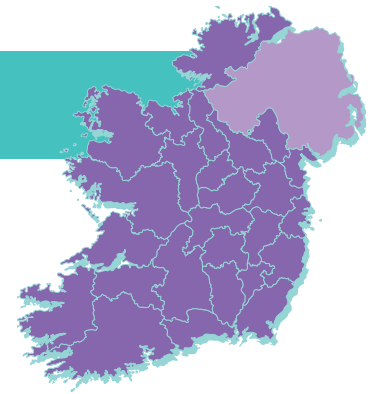
Do I have to do it?

Yes, you must fill it in. It's the law.

What is an enumerator?

This is the person who gives you your census form and who collects it after census night. They will answer any questions you might have.

2. Census 2016 – some interesting facts



Our last census was held in 2016. It told us that our population had increased since 2011.

4,761,865 The population of Ireland in April 2016.

173,613 The increase in the population since April 2011.

There were **53,009** more females than males in Ireland in April 2016.

Over 2 million people were working.



And, **over half a million people (545,507)** were retired.



Thirteen (13) in every 100 people had a disability.

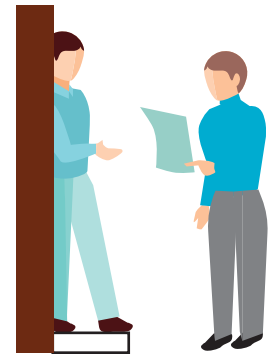
3. Dates to remember 2022

	Mon	Tue	Wed	Thur	Fri	Sat	Sun
February	21	22	23	24	25	26	27
	28						

	Mon	Tue	Wed	Thur	Fri	Sat	Sun
March		1	2	3	4	5	6
	7	8	9	10	11	12	13
	14	15	16	17	18	19	20
	21	22	23	24	25	26	27
	28	29	30	31			

28 February to 3 April

Census enumerators will **deliver** your (blank) census form.



	Mon	Tue	Wed	Thur	Fri	Sat	Sun
April					1	2	3
	4	5	6	7	8	9	10
	11	12	13	14	15	16	17
	18	19	20	21	22	23	24
	25	26	27	28	29	30	

Sunday 3 April is census day

This is census night – the night that census forms are **filled in**.



	Mon	Tue	Wed	Thur	Fri	Sat	Sun
May							1
	2	3	4	5	6	7	8
	9	10	11	12	13	14	15
	16	17	18	19	20	21	22
	23	24	25	26	27	28	29
	30	31					

4 April to 6 May

Census enumerators will **collect** filled-in census forms during these dates. If you would prefer to post your form, you can ask your enumerator for a pre-paid envelope.



6 May

In the unlikely event that your enumerator has not come back to collect your form by 6 May, you can then post it to the address given here.

Central Statistics Office
 PO Box 2021
 Freepost 4726
 Swords
 Co Dublin
 K67 D2X4



5. Types of questions in your form

There are two types of question in your form.

Type 1

H2 Does your household own or rent your accommodation?

Mark one box only

- 1 Own with mortgage or loan
- 2 Own outright
- 3 Rent
- 4 Live here rent free

If renting, who is your landlord?

- 1 Private landlord
- 2 Local Authority
- 3 Voluntary/Co-operative housing body

To answer this question and others like it:

Choose one option from the list

Mark the box like this, with a black or blue pen

If you make a mistake, do this, and mark the correct box

Type 2

6 What is your place of birth?

Give the place where your mother lived at the time of your birth

If IRELAND (including Northern Ireland), write in the COUNTY. If elsewhere ABROAD, write in the COUNTRY

To answer this question and others like it:

USE CAPITAL LETTERS

Every letter gets its own box

W	A	L	E	S															

Leave an empty box between words

Continue to a new line if you need to

N	E	W		Z	E	A													
L	A	N	D																

6. Questions about your accommodation

These are on page 2 of your census form.

H1: When was your house, flat or apartment built?

If you do not know the year it was built,
ask a neighbour or the landlord

Mark only one box

H1 When was your house, flat or apartment first built?

Mark the year in which first built even if the building was subsequently converted, extended or renovated

- 1 Before 1919
- 2 1919 – 1945 inclusive
- 3 1946 – 1960 inclusive
- 4 1961 – 1970 inclusive
- 5 1971 – 1980 inclusive
- 6 1981 – 1990 inclusive
- 7 1991 – 2000 inclusive
- 8 2001 – 2010 inclusive
- 9 2011 – 2015 inclusive
- 10 2016 or later

H2: Do you rent your home, own it, or pay a mortgage?

1. You own your own home and bought it using a mortgage or other type of loan that you are still paying off
2. You own your home and have no mortgage
3. You pay rent
4. You do not pay rent

1. You rent from a private person
2. You rent from a local authority
3. You rent from a voluntary body

H2 Does your household own or rent your accommodation?

Mark one box only

- 1 Own with mortgage or loan
- 2 Own outright
- 3 Rent
- 4 Live here rent free

If renting, who is your landlord?

- 1 Private landlord
- 2 Local Authority
- 3 Voluntary/Co-operative housing body

H3: If you pay rent, how much do you pay?

If you pay rent, write in the amount of rent in Euro

How often do you pay this?

1. Every week
2. Every month
3. Every year

Mark only one box

H3 If your accommodation is rented, how much rent does your household pay?

Enter amount to the nearest Euro

€ . 0 0

Mark one box only

- 1 Per week
2 Per month
3 Per year

H4: How many working smoke alarms are in your house, flat or apartment?

If you have smoke alarms, write in the number you have

If you do not have any smoke alarms, mark the 'None' box

H4 How many working smoke alarms are in your accommodation?

Write in number of smoke alarms

None

H5: How many rooms do you have?

Count kitchen, living rooms and bedrooms

Do **not** count toilets, bathrooms, halls and other areas like this

Write in the number of rooms
Write in the number of bedrooms

H5 How many rooms do you have for use only by your household?

- Do NOT count bathrooms, toilets, kitchenettes, utility rooms, consulting rooms, offices, shops, halls, landings or rooms that can only be used for storage such as cupboards
- Do count all other rooms such as kitchens, living rooms, bedrooms, studies and conservatories you can sit in
- If two rooms have been converted into one, count them as one room

Number of rooms

Of which bedrooms

H6: What type of fuel do you use for your central heating?

Mark only one box

Mark the main type of fuel you use for heating your home

H6 What is the main type of fuel used by the central heating in your accommodation?

Mark one box only

- 1 No central heating
- 2 Oil
- 3 Natural gas
- 4 Electricity
- 5 Coal (including anthracite)
- 6 Peat (including turf)
- 7 Liquid Petroleum Gas (LPG)
- 8 Wood (including wood pellets)
- 9 Other

H7 Does your house, flat or apartment use any of these renewable energy sources?

Mark as many as you use

H7 Does your accommodation use any of the following renewable energy sources?

Mark the boxes that apply

- 1 No
- 2 Solar panels for water heating
- 3 Solar panels for electricity
- 4 Wind turbine
- 5 Air source heat pump
- 6 Ground source heat pump
- 7 Wood
- 8 Other

H8: Where does your water come from?

Mark only one box

1. Public pipe
2. Local authority group water scheme
3. Private group water scheme
4. Your own well or water tank
5. You have no piped water supply

H8 What type of piped water supply does your accommodation have?

Mark one box only

- 1 Public supply
- 2 Public Group Scheme
- 3 Private Group Scheme
- 4 Private source (eg well, lake, rainwater tank, etc)
- 5 No piped water supply

H9: Where does your toilet waste go?

Mark only one box

1. Public pipe
2. Septic tank
3. Your own system
4. Other, including chemical toilets
5. You have no toilet

H9 What type of sewerage facility does your accommodation have?

Mark one box only

- 1 Public sewer
- 2 Individual septic tank
- 3 Individual treatment system other than a septic tank
- 4 Other sewerage facility
- 5 No sewerage facility

H10: How many cars or vans do you have?

Count your company car if you use it for yourself

H10 How many cars or vans are owned or are available for use by one or more members of your household?

Include any company car or van if available for private use

Mark one box only

- 1 One
- 2 Two
- 3 Three
- 4 Four or more
- 5 None

H11: What kind of internet connection do you have in your home?
If you have the internet, which devices access the internet in your home?

Mark as many as you have

If you have the internet, which devices access the internet in your home?

Mark all that apply

H11 What type of internet connection does your household have?

Mark the boxes that apply

- 1 Fixed broadband (eg phone/TV cable, internet cable, etc)
- 2 Mobile broadband (eg 3G, 4G, dongle, etc)
- 3 Satellite
- 4 Other connection
- 5 No internet connection

If connected, which devices access the internet in your household?

Mark the boxes that apply

- 1 Desktop PC
- 2 Laptop (including notebook, netbook, etc)
- 3 Tablet
- 4 Mobile phone
- 5 Smart TV
- 6 Video game console
- 7 Smart domestic appliance
- 8 Other, write in description

H12 says to go to the next page (page 3) of your census form

H12 → Go to next page

8. Questions about the people in your home on census night

Person 1 (List 1 page 3)

You are Person 1. Please answer the questions on the next three pages (page 4, page 5 and page 6). Questions for Person 2 in List 1 start on page 7 of the census form. Questions for Person 3 in List 1 start on page 10 of the census form, and so on.

Question 1: What is your name?

Write in your first name

Write in your last name

1 What is your name? (Person 1)
First name (BLOCK CAPITALS)

Surname (BLOCK CAPITALS)

Question 2: Are you male or female?

Mark male or female

2 What is your sex?

1 Male 2 Female

Question 3: What is your date of birth?

Put 0 in front of numbers 1 to 9

Example: if you were born 1 July 1971, you would fill in

01 07 1971

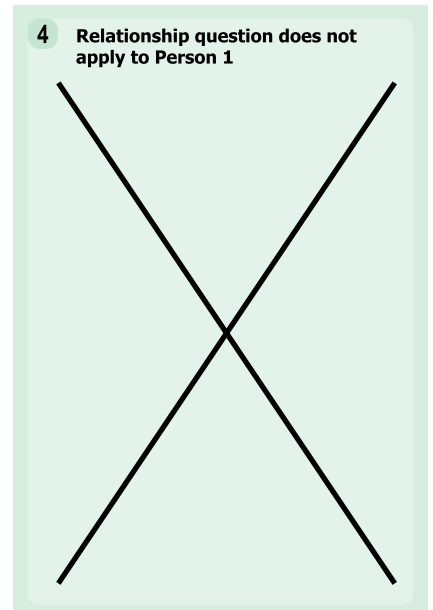
3 What is your date of birth?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

January	=	01	July	=	07
February	=	02	August	=	08
March	=	03	September	=	09
April	=	04	October	=	10
May	=	05	November	=	11
June	=	06	December	=	12

Question 4: This asks how a person is related to other people in the home

As you are Person 1, this question does not apply to you



To answer this question for each of the other people in your home on census night (Persons 2, 3, 4 and so on), you should mark the box that describes how they are related to you.

If the person is not related to you (Person 1), mark box **10**. Example, a foster child.

4 What is your relationship to Person 1?

Mark one box only

Relationship of PERSON 2 to	Person 1
Husband or wife	1 <input type="checkbox"/>
Partner (incl. same-sex partner)	2 <input type="checkbox"/>
Son or daughter	3 <input type="checkbox"/>
Step-child	4 <input type="checkbox"/>
Brother or sister	5 <input type="checkbox"/>
Mother or father	6 <input type="checkbox"/>
Step-mother/-father	7 <input type="checkbox"/>
Grandchild	8 <input type="checkbox"/>
Other related	9 <input type="checkbox"/>
Unrelated (incl. foster child)	10 <input type="checkbox"/>

Question 5: Are you married? Have you ever been married?

Only answer this section if you are 15 years of age or older

If 'No', mark box 1

If 'Yes', mark the answer that applies

5 What is your current marital status?

Answer if aged 15 years or over

Mark one box only

- 1 Single (never married or never in a same-sex civil partnership)
- 2 Married (first marriage)
- 3 Re-married
- 4 In a registered same-sex civil partnership
- 5 Separated
- 6 Divorced
- 7 Widowed

Question 6: What county or country did your mother live in when you were born?

If in Ireland, write in the county

If outside Ireland, write in the country

List of counties

Antrim	Leitrim
Armagh	Limerick
Carlow	Longford
Cavan	Louth
Clare	Mayo
Cork	Meath
Derry	Monaghan
Donegal	Offaly
Down	Roscommon
Dublin	Sligo
Fermanagh	Tipperary
Galway	Tyrone
Kerry	Waterford
Kildare	Westmeath
Kilkenny	Wexford
Laois	Wicklow

6 What is your place of birth?

Give the place where your mother lived at the time of your birth

If IRELAND (including Northern Ireland), write in the COUNTY. If elsewhere ABROAD, write in the COUNTRY

Question 10: What country are you a citizen of?

If you are an Irish citizen, mark box **1**

If you are a citizen of another country, mark box **2** and write in the country you are a citizen of

If you are both an Irish citizen and a citizen of another country, please mark both box **1** and box **2** and write in the country

If you are not an Irish citizen, and are not recognised as a citizen by any other country, mark box **3** only

10 What is your country of citizenship?

If you have dual country of citizenship, please declare both

- 1 Ireland
 2 Other CITIZENSHIP, write in

- 3 No citizenship

Question 11: What ethnic group or background do you feel you belong to?

First choose a section from A to D, then only mark one box

If you belong to a mixed ethnic group or background, or if your ethnic group or background is not listed, please write it in here

11 What is your ethnic group/ background?

Choose ONE section from A to D, then mark the appropriate box

A White

- 1 Irish
 2 Irish Traveller
 3 Roma
 4 Any other White background

B Black or Black Irish

- 5 African
 6 Any other Black background

C Asian or Asian Irish

- 7 Chinese
 8 Indian/Pakistani/Bangladeshi
 9 Any other Asian background

D Other, including mixed group/ background

- 10 Arabic
 11 Mixed, write in description
 12 Other, write in description

Question 12: What is your religion, if any?

Mark only one box

If you have a religion and it is not listed, mark box 7 and write it in here

12 What is your religion, if any?

Mark one box only

- 1 No religion
- 2 Roman Catholic
- 3 Church of Ireland
- 4 Islam
- 5 Orthodox Christian
- 6 Presbyterian
- 7 Other, write in your RELIGION

Question 13: Can you speak Irish?

Be sure to mark 'Yes' or 'No'

If you answered 'Yes', how often do you speak Irish?

Mark any boxes that apply

- 1. Every day in school
- 2. Every day outside school
- 3. Every week
- 4. Not very often
- 5. Never

If you answered 'Yes', how well do you speak Irish?

Mark only one box

13 Can you speak Irish?

Answer if aged 3 years or over

- 1 Yes 2 No

If 'Yes', do you speak Irish?

Mark the boxes that apply

- 1 Daily, within the education system
- 2 Daily, outside the education system
- 3 Weekly
- 4 Less often
- 5 Never

If 'Yes', how well do you speak Irish?

Mark one box only

- 1 Very well
- 2 Well
- 3 Not well

Question 14: While at home, do you speak a language other than English or Irish?

If you mark 'No', go to Question 15
 If you answered 'Yes',
 write in the name of this language

How well do you speak English?

Mark only one box

14 Do you speak a language other than English or Irish at home?

1 Yes
 2 No → **Go to Q15**

What is this language?

(eg POLISH, GERMAN, IRISH SIGN LANGUAGE)

How well do you speak English?

Mark one box only

1 Very well
 2 Well
 3 Not well
 4 Not at all

Question 15: Do you have any of these long-lasting conditions or difficulties?

Mark the most relevant option from the following three to each part of this question – option 1. 'Yes' a great deal, option 2. 'Yes' not much, or option 3. 'No'

- a. You are blind or have a severe problem seeing
- b. You are deaf or have a severe problem hearing
- c. You have a problem with activities like walking, climbing stairs or carrying things
- d. You have a learning or intellectual disability
- e. You have a problem with learning, remembering or concentrating
- f. You have a psychological or emotional condition
- g. You have another disability or serious illness

15 Do you have any of the following long-lasting conditions or difficulties?

	1 Yes, to a great extent	2 Yes, to some extent	3 No
(a) Blindness or a vision impairment	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
(b) Deafness or a hearing impairment	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
(c) A difficulty with basic physical activities such as walking, climbing stairs, reaching, lifting or carrying	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
(d) An intellectual disability	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
(e) A difficulty with learning, remembering or concentrating	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
(f) A psychological or emotional condition or a mental health issue	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
(g) A difficulty with pain, breathing or any other chronic illness or condition	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

If you mark 'Yes' to **any** part of question 15, go to Question 16
 If you mark 'No' to **every** part of question 15, go to Question 17

Question 16: Does your long-lasting condition cause you problems doing some activities? (include problems due to old age)

Mark **1** 'Yes' a lot of difficulty, **2** 'Yes' a little difficulty or **3** 'No' to each part of this question

- a. You find it hard to dress, have a bath or move inside your home
- b. You find it hard to leave your home alone to go to the shop or doctor
- c. You find it hard to work or to go to school
- d. You find it hard to do other things like using buses or doing things for fun

16 As a result of a long-lasting condition, do you have difficulty doing any of the following?

Include issues due to old age

- | | 1 Yes, a lot | 2 Yes, a little | 3 No |
|-------------------------------------------------------------------------------|-------------------------|-------------------------|-------------------------|
| (a) Dressing, bathing or getting around inside the home | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |
| (b) Going outside the home to shop or visit a doctor's surgery | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |
| (c) Working at a job or business or attending school or college | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |
| (d) Participating in other activities, for example leisure or using transport | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |

Question 17: How is your health in general?

Mark only one box

17 How is your health in general?

Mark ~~one~~ **one** box only

- 1 Very good
- 2 Good
- 3 Fair
- 4 Bad
- 5 Very bad

Question 18: Do you smoke?

Mark only one box

- 1. You smoke every day
- 2. You smoke sometimes
- 3. You do not smoke now
- 4. You never smoked

18 Do you smoke tobacco products?

Mark ~~one~~ **one** box only

- 1 Yes - daily
- 2 Yes - occasionally
- 3 No - have given up smoking
- 4 Never

Question 19: If you go to work, school, college or childcare, how do you get there? If you work mainly from home, please mark the last box

Mark only one box

If you travel by more than one way, mark the box for the longest part of the journey

19 How do you usually travel to work, school, college or childcare?

Mark one box only, for the longest part, by distance, of your usual journey

- 1 Not at work, school, college or childcare
- 2 On foot
- 3 Bicycle
- 4 Bus, minibus or coach
- 5 Train, DART or LUAS
- 6 Motorcycle or scooter
- 7 Driving a car
- 8 Passenger in a car
- 9 Van
- 10 Other (including lorry)
- 11 Work mainly at or from home

Question 20: What time do you leave home to go to work, school, college or childcare?

Write in the time using the 24-hour clock

Examples: 7am on the 24-hour clock is 07:00

8.30am on the 24-hour clock is 08:30

20 What time do you usually leave home?

Use 24-hour clock, eg 08:30

:

Question 21: How long does it take you to get to work, school, college or childcare?

Hours to minutes

$\frac{1}{2}$ = 30

1 = 60

$1\frac{1}{2}$ = 90

2 = 120

Please answer in minutes

21 How long does your journey take?

Write in minutes

Question 22: What time do you leave work, school, college or childcare?

Write in the time using the 24-hour clock

Examples: 4pm on the 24-hour clock is 16:00

5.30pm on the 24-hour clock is 17:30

22 What time do you usually leave work, school, college or childcare?

Use 24-hour clock, eg 17:30

:

Question 23: Do you take care of a family member, neighbour or friend, who has a long-term illness, a health problem due to old age or disability, without being paid?

Answer 'Yes' to this question even if you get the Carer's Allowance or Carer's Benefit

23 Do you provide regular unpaid personal help or support to a family member, neighbour or friend with a long-term illness, health issue, an issue related to old age or disability?

1 Yes 2 No

If 'Yes', for how many hours per week?

Care provided on a 24-hour basis, 7 days a week equates to 168 hours

Write in hours

If 'Yes', write in the number of hours a week

24 hours a day, 7 days a week = 168 hours

Question 24: Do you regularly do voluntary work or help in any of these activities without being paid?

Mark any boxes that apply

1. A social or charity group
2. A religious group
3. Sporting groups
4. A political group
5. In your local area

24 Do you regularly engage in helping or voluntary work in any of the following activities without pay?

Mark all the boxes that apply

- 1 A social or charitable organisation
- 2 A religious group or church
- 3 A sporting organisation
- 4 A political organisation
- 5 In your community
- 6 No

Question 25: If you are aged 15 or over, continue to the next question If you are aged under 15, go to Question 36

**25 If you are aged under 15
→ Go to Q36**

Question 26: Have you finished your full-time education?

Be sure to mark 'Yes' or 'No'

If 'Yes', how old were you when you finished school or college?

26 Have you ceased your full-time education?

1 Yes 2 No

If 'Yes', write in AGE at which it ceased

Question 27: What is the highest level you have done in school or college so far?

1. You have no formal education or training
2. Primary school
3. Junior Cert or Inter Cert level
4. Leaving Cert level
- 5, 6 and 7. College, but not a degree
- 8, 9, 10 and 11. Degree or professional qualifications

27 What is the highest level of education/training (full-time or part-time) which you have completed to date?

Mark one box only

- 1 No formal education/training
- 2 Primary education
NFQ Levels 1 or 2
- 3 Lower Secondary
NFQ Level 3
Junior/Inter/Group Certificate
- 4 Upper Secondary
NFQ Levels 4 or 5
Leaving Certificate
- 5 Technical or Vocational
NFQ Levels 4 or 5
- 6 Advanced Certificate/
Completed Apprenticeship
NFQ Level 6
- 7 Higher Certificate
NFQ Level 6
- 8 Ordinary Bachelor
Degree or National
Diploma
NFQ Level 7
- 9 Honours Bachelor
Degree/Professional
qualification or both
NFQ Level 8
- 10 Postgraduate Diploma or
Master's Degree
NFQ Level 9
- 11 Doctorate (PhD) or higher
NFQ Level 10

Question 28: Are you working, unemployed, at school or retired?

Mark only one box

28 How would you describe your present principal status?

Mark one box only

- 1 Working for payment or profit
- 2 Looking for first regular job
- 3 Short-term unemployed (less than 12 months)
- 4 Long-term unemployed (12 months or more)
- 5 Student or pupil
- 6 Looking after home/family
- 7 Retired from employment
- 8 Unable to work due to permanent sickness or disability
- 9 Other, write in

Question 29: If your answer to Question 28 was 1, go to Question 30

29 If you are working → Go to Q30

If you are unemployed or retired → Go to Q31

If you are a student → Go to Q36

Otherwise → Go to Q38

If your answer to Question 28 was 3, 4, or 7, go to Question 31

If your answer to Question 28 was 5, go to Question 36

If your answer to Question 28 was 2, 6, 8 or 9, go to Question 38

Question 30: If you are working, do you ever work from home?
If 'Yes', how many days per week do you work from home?

Be sure to mark 'Yes' or 'No'

30 If you are at work, do you ever work from home?

- 1 Yes
- 2 No

If 'Yes', how many days per week do you usually work from home?

Write in the number of days

Write in how many days

Question 37: If you are under 15 years old, are you in any kind of childcare?
If 'Yes', what is the main type of childcare and how many hours per week are you there?

Make sure to mark 'Yes' or 'No'

Mark only one box. If 'Yes', is it:

1. A relative or family friend for no pay
2. A relative or family friend for pay
3. A childminder in their home
4. A childminder, au pair, nanny in your home
5. A childcare facility
6. Other types of childcare

Write in the number of hours per week you are there during term-times

37 If you are aged under 15, are you in any type of childcare?

1 Yes 2 No

If 'Yes', what is the main type of childcare?

Mark one box only

- 1 Unpaid relative or family member
- 2 Paid relative or family member
- 3 Childminder (in childminder's home)
- 4 Au pair/Nanny/Childminder (in child's home)
- 5 Crèche/Montessori/Playgroup/After school
- 6 Other (including special needs facility, breakfast clubs, etc)

And for how many hours per week during term times?

Write in hours

Question 38 says to answer the questions starting on the next page of your census form for the next person listed on List 1 on page 3 (Person 2)

If there are no other people staying in your home on census night, go to page 22 of your census form

**38 Answer questions for Person 2 starting on the next page.
If there are no other persons present in the household on Census Night
→ Go to page 22**

9. Questions about absent people on census night

Questions about absent people are on pages 22 and 23 of your census form.

List 2 on page 3 of your census form lists anyone who usually lives with you, but is away from home (absent) on census night.

If nobody is listed on **List 2**, go to page 23 of your census form and sign your name. You are then finished filling in your census form. Keep it safe until your census enumerator calls to collect it.

If there are people listed on **List 2**, please answer questions A1 to A8 for **each person**.

Question A1: What is the absent person's name?

Write in the first name of the absent person

Write in the last name of the absent person

A1 What is this person's name?
First name (BLOCK CAPITALS)

Surname (BLOCK CAPITALS)

Question A2: Is the absent person male or female?

Mark male or female

A2 What is this person's sex?
1 Male 2 Female

Question A3: What is the absent person's date of birth?

Put 0 in front of numbers 1 to 9

Example: if you were born 1 July 1971,
you would fill in 01 07 1971

A3 What is this person's date of birth?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

January	=	01	July	=	07
February	=	02	August	=	08
March	=	03	September	=	09
April	=	04	October	=	10
May	=	05	November	=	11
June	=	06	December	=	12

Question A4: How is the absent person related to you?

If the relationship is not listed, mark box **9** and write in the relationship

If the absent person is not related to you, mark box **10**
Example, a foster child

A4 What is the relationship of this person to Person 1 on page 4?

Mark one box only

- 1 Husband or wife
- 2 Partner (incl. same-sex partner)
- 3 Son or daughter
- 9 Other related, write in RELATIONSHIP

--	--	--	--	--	--	--	--	--	--

- 10 Unrelated (incl. foster child)

Question A5: Is the absent person married?

Answer if the absent person is 15 years old or older

If 'No', mark box **1**

If 'Yes', mark the box that applies

A5 What is this person's current marital status?

Answer if aged 15 years or over

Mark one box only

- 1 Single (never married or never in a same-sex civil partnership)
- 2 Married (incl. re-married)
- 4 In a registered same-sex civil partnership
- 5 Separated
- 6 Divorced
- 7 Widowed

Question A6: How long is the absent person away for?

A6 How long altogether is this person away for?

- 1 Less than 12 months
- 2 12 months or more

Question A7: Was the absent person in the country on census night?

A7 Was this person in the Republic of Ireland on Census Night?

- 1 Yes
- 2 No

Question A8: What country is the absent person a citizen of?

If the absent person is an Irish citizen, mark box **1**

If the absent person is a citizen of another country, mark box **2** and write in the country the absent person is a citizen of

If the absent person is both an Irish citizen and a citizen of another country, please mark both box **1** and box **2** and write in the country

If the absent person is not an Irish citizen, and is not recognised as a citizen by any other country, mark box **3** only

A8 What is the country of this person's citizenship?

If they have dual country of citizenship, please declare both

- 1 Ireland
- 2 Other CITIZENSHIP, write in

- 3 No citizenship

10. Sign your name in the box on page 23 of your form

Declaration	
Declaration to be completed by the person responsible for completing the form	
Before you sign and date the declaration please check:	
<ul style="list-style-type: none">• That in List 1 on page 3, you have accounted for all persons (including visitors) who spent Census Night at this address.• That you have answered all questions which should have been answered for each person who spent Census Night in the household (pages 4 to 21 and any additional Individual Forms).• That in List 2 on page 3, you have accounted for all persons who usually live at this address but who were temporarily absent on Census Night.• That you have answered all questions on pages 22 to 23 for all household members temporarily absent on Census Night.	
I declare that this form is correct and complete to the best of my knowledge and belief.	
Signature	Date
<input type="text"/>	<input type="text"/>

You have now completed your Census 2022 form!
Please keep it safe until your census enumerator calls to collect it.

11. Time Capsule

After you sign though, there is new feature – a time capsule – you might like to consider. It is on page 23 of the census form.

In this new feature, you are invited to write in your own personal message in the box on the form. It is your choice to do this or not. If you write a message on the form, it will remain confidential until all of the Census 2022 forms are made available to the public in a hundred years' time.

Time Capsule:

Information you provide in this Time Capsule is optional and is collected voluntarily under Section 24 of the Statistics Act 1993. This content is protected by the same confidentiality protections as all your Census data for 100 years. After 100 years, this Time Capsule will be made available to the public. **This space is for handwritten messages only. Photographs or other attachments will be removed and cannot be returned.**



12. Words used in your census form

The following is an A-Z list of words you will see in your census form. It is helpful to check here to learn what some of the specialist words mean.

Absent	Away from home
Accommodation	House, flat, apartment, bedsit, caravan or mobile home where people live
Apprenticeship	Learning a trade
Broadband	High-speed connection to the internet
Ceased	Ended or finished
Citizenship	Usually, the country where you were born and from which you have a passport
Confidentiality	Privacy. The information you give about you on your census form is private and will never be given to any other organisation
Comprehensive picture	A full picture
Crèche	A nursery
Declaration	A statement that you have completed the form and included all of the people and information
Devices	A piece of equipment, for example a mobile phone or a computer
Emotional condition	A condition that affects how you feel
Enumerated	Counted during a census
Enumerator	The person who delivers and collects your census form
Equate	Equals
Explanatory notes	Notes that give more information on how to complete some of the questions on your census form

Household	A person who lives alone or a group of people who live at the same address and share one meal a day or share a living or sitting room
Household form	The main census form that we will deliver to every home in Ireland and ask you to complete
Inclusive	2016-2021 inclusive means 2016, 2017, 2018, 2019, 2020 and 2021
Individual form	When there are more than six people in the household on census night, you must fill in an individual blue form for each added person
Intellectual disability	A difficulty, for example, with communicating, mixing with others or taking care of everyday needs
Journey	How you travel
Local authority	A city or county council, for example Dublin City Council, Mayo County Council
Long-lasting condition	A condition that lasts for six months or more or that comes and goes regularly, for example, diabetes
Marital status	Whether you are, for example, married, single, divorced, separated, widowed
NFQ	National Framework of Qualifications
Occupation	The work you do
Owner-occupied house	A house you bought and live in
Persons	Individual people
Present principal status	What you do from day to day, for example employee, unemployed, student, carer for family, retired
Professional qualification	Qualification you get when you finish studying to gain special skills to work in certain areas, for example, as an accountant, lawyer or doctor
Post-graduate diploma	A diploma you study for after being awarded a degree
Public pipe	Water pipe from the main system that supplies a community

Qualification	An official record that you have a skill or qualification. A qualification could be a certificate, diploma or degree
Relationship	How you are related to another person in your household, for example husband, wife, partner, son, daughter, step-child, brother, sister, mother, father, grandparent, step-mother, step-father
Renewable energy	Energy collected from resources that are naturally replaced such as: sunlight, wind, water, plants and animal waste
Residents	People who live in a building such as a house, apartment, caravan or mobile home
Statistical purposes	Counting and recording different responses to each question
Technical or vocational	A qualification that helps you develop a special skill for a job, from a place such as an Institute of Technology (or previously a Regional Technical College)
Usual residence	The place you usually live
Voluntary work	Work that is not paid

13. More help and information

If you want help filling in your Census 2022 form, ask your census enumerator or contact the Central Statistics Office.

(Your census enumerator is the person who delivers and collects your census form.)

Central Statistics Office

Census Helpdesk: 0818 2022 04

Email: census@csso.ie

National Adult Literacy Agency (NALA)

Sandford Lodge

Sandford Close

Ranelagh

Dublin 6

D06 4F65

Telephone: (01) 412 7900

Fax: (01) 497 6038

Email: info@nala.ie

NALA website: www.nala.ie

Freephone support line: 1800 20 20 65

