



2006 CENSUS

Count yourself in!
May 16, 2006

2D

ANY QUESTIONS?

www.census2006.ca

Call us free of charge at
1 877 594-2006

TTY / TDD users call
1 888 243-0730

Prov.	CD	CU	VN	VR Line No.	CLD	Questionnaire No.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> of <input type="text"/>

FOR INFORMATION ONLY

Canada's census paints a picture of society—the people, our cultures and the communities where we live. The tradition continues when people across the country in northern and arctic regions, First Nation communities and other Aboriginal communities and settlements complete their 2006 Census forms.

Aboriginal organizations, community groups, businesses and governments use census data to plan for daily needs such as day care, education and training, housing, language and cultural programs. Information may also be used by Statistics Canada for selecting samples or following up respondents for some of our surveys.

Statistics Canada protects absolutely the confidentiality of the personal information you provide. No one outside Statistics Canada has access to your personal information without your consent. In question 53, your consent is sought to make your census information available in 92 years for important historical and genealogical research.

According to the *Statistics Act*, a census must be conducted every five years and every household must complete their census form.

It's important for you and your community that you count yourself in.

Ivan Fellegi
Chief Statistician of Canada

This information is collected under the authority of the *Statistics Act*, R.S.C. 1985, c. S-19, and must be provided by law.

CONFIDENTIAL WHEN COMPLETED

STEP A

Use a blue or black ballpoint pen.

Please print using **CAPITAL LETTERS**.

Begin here by printing the address

No. and street or lot and concession

Apt./room/unit

City, municipality, town, village, Indian reserve

Province/territory

Postal code

Area code

Telephone number



Statistics Canada
Statistique Canada

0701



Canada

1. WHOM TO INCLUDE IN **STEP B**

- **EVERYONE WHO USUALLY LIVES HERE, AT THIS ADDRESS**, including newborn babies and room-mates;
- **STUDENTS** who return to live with their parents during the year should be included at their parents' address, even if they live elsewhere while attending school or working at a summer job;
- **CHILDREN IN JOINT CUSTODY** who live here most of the time. Children who spend equal time with each parent should be included in the home of the parent where they are staying on May 16, 2006;
- **SPOUSES OR COMMON-LAW PARTNERS WHO LIVE ELSEWHERE** while working or studying, but who return here periodically;
- **LANDED IMMIGRANTS** who usually live at this address;
- Persons claiming **REFUGEE STATUS** and family members living here with them;
- **PERSONS FROM ANOTHER COUNTRY WITH A WORK OR STUDY PERMIT** and family members living here with them;
- **PERSONS** who usually live here but are now **IN AN INSTITUTION** (such as a home for the aged, a hospital or a prison), **IF THEY HAVE BEEN THERE LESS THAN SIX MONTHS**;
- **PERSONS** staying here on May 16, 2006, **WHO HAVE NO USUAL HOME ELSEWHERE**.

2. DO NOT INCLUDE IN **STEP B**

- Persons who have their **usual home at another address in Canada** and who are staying here temporarily (for example, persons visiting or persons who have their secondary residence here, at this address);
- Residents of another country **visiting** Canada (for example, on a business trip or on vacation);
- Government representatives of another country and their family members.

IF ALL PERSONS STAYING AT THIS ADDRESS on May 16, 2006, usually live elsewhere in Canada **or** are visitors or government representatives of another country, mark this circle.

▶ Record in the Comments section on the back page of the questionnaire the name and usual address of each temporary resident **or** the type of foreign resident **or** an explanation. Thank the respondent for his / her cooperation.

END OF INTERVIEW

FOR INFORMATION ONLY



**STEP
B**

1. Including yourself, how many persons usually live here, at this address, as of May 16, 2006? Include all persons who usually live here, even if they are temporarily away. →
2. Would you begin by giving me the name of an adult followed, if applicable, by that person's spouse or common-law partner and by their children who usually live here? Continue with all other persons who usually live here.

Make sure that the person being interviewed is on the list.

	FAMILY NAME	GIVEN NAME
Person 1	<input type="text"/>	<input type="text"/>
Person 2	<input type="text"/>	<input type="text"/>
Person 3	<input type="text"/>	<input type="text"/>
Person 4	<input type="text"/>	<input type="text"/>
Person 5	<input type="text"/>	<input type="text"/>
Person 6	<input type="text"/>	<input type="text"/>
Person 7	<input type="text"/>	<input type="text"/>
Person 8	<input type="text"/>	<input type="text"/>
Person 9	<input type="text"/>	<input type="text"/>
Person 10	<input type="text"/>	<input type="text"/>

FOR INFORMATION ONLY

**STEP
C**

Read list of names back to respondent, then ask:

Did you leave anyone out because you were not sure the person should be included?

- No
- Yes → Determine if these persons should be included. Add the additional names in Step B, if applicable.

For example:

- a person living at this address who has another home;
- a person temporarily away.

**STEP
D**

1. Is anyone listed in Step B a farm operator who produces at least one agricultural product intended for sale? (crops, livestock, milk, poultry, eggs, greenhouse or nursery products, Christmas trees, sod, honey, bees, maple syrup products, furs, etc.)

- No → **Go to Step E** Yes

2. Does this farm operator make the day-to-day management decisions related to the farm?

- No Yes

**STEP
E**

Copy the names in Step B to Question 1, on top of page 4. Keep the same order.

If there are more than five persons in this household, enter the first five on this questionnaire and continue on a second questionnaire. Remember to list the 6th person in the column marked "PERSON 2".



1 NAME	PERSON 1	PERSON 2
<p>In the spaces provided, copy the names in the same order as in Step B. Then ask the following questions for each person.</p>	<p>Family name _____</p> <p>Given name _____</p> <p style="text-align: right;"><input type="checkbox"/> Age</p>	<p>Family name _____</p> <p>Given name _____</p> <p style="text-align: right;"><input type="checkbox"/> Age</p>
<p>2 Is this person male or female?</p>	<p><input type="radio"/> Male</p> <p><input type="radio"/> Female</p>	<p><input type="radio"/> Male</p> <p><input type="radio"/> Female</p>
<p>3 What is this person's date of birth?</p> <p><i>If exact date is not known, enter best estimate. If born before May 16, 1991, mark "X" in the age box which is below each person's name.</i></p>	<p>Date of birth</p> <p>Day Month Year</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>Date of birth</p> <p>Day Month Year</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
<p>4 Is this person ...</p> <p><i>Mark "⊗" one circle only.</i></p> <p><i>People who are married according to traditional First Nations or Aboriginal customs should be considered as legally married.</i></p>	<p><input type="radio"/> Never legally married (single)?</p> <p><input type="radio"/> Legally married (and not separated)?</p> <p><input type="radio"/> Separated, but still legally married?</p> <p><input type="radio"/> Divorced?</p> <p><input type="radio"/> Widowed?</p>	<p><input type="radio"/> Never legally married (single)?</p> <p><input type="radio"/> Legally married (and not separated)?</p> <p><input type="radio"/> Separated, but still legally married?</p> <p><input type="radio"/> Divorced?</p> <p><input type="radio"/> Widowed?</p>
<p>5 Is this person living with a common-law partner?</p> <p><i>Common-law refers to two people of the opposite sex or of the same sex who live together as a couple but who are not legally married to each other.</i></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>6 How is this person related to</p> <p>Enter name of PERSON 1</p> <p><input type="text"/> ?</p> <p><i>Mark "⊗" or specify one response only.</i></p> <p><i>Stepchildren, adopted children and children of a common-law partner should be considered sons and daughters.</i></p> <p><i>If none of the choices apply, use the "Other" box to indicate this person's relationship to Person 1.</i></p> <p><i>Examples of "Other" relationships to Person 1:</i></p> <ul style="list-style-type: none"> • cousin • niece or nephew • lodger's husband or wife • room-mate's son or daughter • employee • same-sex married spouse 	<p style="text-align: center; color: red; font-weight: bold; font-size: 2em; transform: rotate(-10deg);">FOR INFORMATION ONLY</p> <p><input checked="" type="radio"/> PERSON 1</p>	<p><input type="radio"/> Husband or wife of Person 1</p> <p><input type="radio"/> Opposite-sex common-law partner of Person 1</p> <p><input type="radio"/> Same-sex common-law partner of Person 1</p> <p><input type="radio"/> Son or daughter of Person 1</p> <p><input type="radio"/> Son-in-law or daughter-in-law of Person 1</p> <p><input type="radio"/> Grandchild of Person 1</p> <p><input type="radio"/> Father or mother of Person 1</p> <p><input type="radio"/> Father-in-law or mother-in-law of Person 1</p> <p><input type="radio"/> Grandparent of Person 1</p> <p><input type="radio"/> Brother or sister of Person 1</p> <p><input type="radio"/> Brother-in-law or sister-in-law of Person 1</p> <p><input type="radio"/> Lodger or boarder</p> <p><input type="radio"/> Room-mate</p> <p>Other — Specify</p> <p><input type="text"/></p> <p><input type="text"/></p>



<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female
<p>Date of birth</p> <p>Day Month Year</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>Date of birth</p> <p>Day Month Year</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>Date of birth</p> <p>Day Month Year</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
<input type="radio"/> Never legally married (single)? <input type="radio"/> Legally married (and not separated)? <input type="radio"/> Separated, but still legally married? <input type="radio"/> Divorced? <input type="radio"/> Widowed?	<input type="radio"/> Never legally married (single)? <input type="radio"/> Legally married (and not separated)? <input type="radio"/> Separated, but still legally married? <input type="radio"/> Divorced? <input type="radio"/> Widowed?	<input type="radio"/> Never legally married (single)? <input type="radio"/> Legally married (and not separated)? <input type="radio"/> Separated, but still legally married? <input type="radio"/> Divorced? <input type="radio"/> Widowed?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
FOR INFORMATION ONLY		
<input type="radio"/> Son or daughter of Person 1 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 <input type="radio"/> Grandchild of Person 1 <input type="radio"/> Father or mother of Person 1 <input type="radio"/> Father-in-law or mother-in-law of Person 1 <input type="radio"/> Grandparent of Person 1 <input type="radio"/> Brother or sister of Person 1 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 <input type="radio"/> Lodger or boarder <input type="radio"/> Room-mate <input type="radio"/> Other — <i>Specify</i>	<input type="radio"/> Son or daughter of Person 1 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 <input type="radio"/> Grandchild of Person 1 <input type="radio"/> Father or mother of Person 1 <input type="radio"/> Father-in-law or mother-in-law of Person 1 <input type="radio"/> Grandparent of Person 1 <input type="radio"/> Brother or sister of Person 1 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 <input type="radio"/> Lodger or boarder <input type="radio"/> Room-mate <input type="radio"/> Other — <i>Specify</i>	<input type="radio"/> Son or daughter of Person 1 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 <input type="radio"/> Grandchild of Person 1 <input type="radio"/> Father or mother of Person 1 <input type="radio"/> Father-in-law or mother-in-law of Person 1 <input type="radio"/> Grandparent of Person 1 <input type="radio"/> Brother or sister of Person 1 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 <input type="radio"/> Lodger or boarder <input type="radio"/> Room-mate <input type="radio"/> Other — <i>Specify</i>
<p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>



ACTIVITIES OF DAILY LIVING																																										
<p>7 Does this person have any difficulty hearing, seeing, communicating, walking, climbing stairs, bending, learning or doing any similar activities?</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> Yes, often <input type="radio"/> No</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> Yes, often <input type="radio"/> No</p>																																								
<p>8 Does a physical condition or mental condition or health problem reduce the amount or the kind of activity this person can do:</p> <p>(a) at home?</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> No <input type="radio"/> Yes, often</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> No <input type="radio"/> Yes, often</p>																																								
<p>(b) at work or at school?</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> No <input type="radio"/> Yes, often <input type="radio"/> Not applicable</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> No <input type="radio"/> Yes, often <input type="radio"/> Not applicable</p>																																								
<p>(c) in other activities, for example, transportation or leisure?</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> Yes, often <input type="radio"/> No</p>	<p><input type="radio"/> Yes, sometimes <input type="radio"/> Yes, often <input type="radio"/> No</p>																																								
SOCIOCULTURAL INFORMATION																																										
<p>9 Where was this person born?</p> <p><i>Specify one response only, according to present boundaries.</i></p>	<p>Born in Canada</p> <p><input type="radio"/> Nfld.Lab. <input type="radio"/> Manitoba <input type="radio"/> P.E.I. <input type="radio"/> Sask. <input type="radio"/> N.S. <input type="radio"/> Alberta <input type="radio"/> N.B. <input type="radio"/> B.C. <input type="radio"/> Quebec <input type="radio"/> Yukon <input type="radio"/> Ontario <input type="radio"/> N.W.T. <input type="radio"/> Nunavut</p> <p>Born outside Canada <i>Specify country</i></p> <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					<p>Born in Canada</p> <p><input type="radio"/> Nfld.Lab. <input type="radio"/> Manitoba <input type="radio"/> P.E.I. <input type="radio"/> Sask. <input type="radio"/> N.S. <input type="radio"/> Alberta <input type="radio"/> N.B. <input type="radio"/> B.C. <input type="radio"/> Quebec <input type="radio"/> Yukon <input type="radio"/> Ontario <input type="radio"/> N.W.T. <input type="radio"/> Nunavut</p> <p>Born outside Canada <i>Specify country</i></p> <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				
<p>If this person lives on an Indian reserve, go to Question 13.</p>																																										
<p>10 Of what country is this person a citizen?</p> <p><i>Indicate more than one citizenship, if applicable.</i></p> <p><i>“Canada, by naturalization” refers to the process by which an immigrant is granted citizenship of Canada, under the Citizenship Act.</i></p>	<p><input type="radio"/> Canada, by birth <input type="radio"/> Canada, by naturalization Other country — <i>Specify</i></p> <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					<p><input type="radio"/> Canada, by birth <input type="radio"/> Canada, by naturalization Other country — <i>Specify</i></p> <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				

FOR INFORMATION ONLY



- Yes, sometimes
- Yes, often
- No

- Yes, sometimes
- Yes, often
- No

- Yes, sometimes
- Yes, often
- No

FOR INFORMATION ONLY

- Yes, sometimes No
- Yes, often

- Yes, sometimes No
- Yes, often

- Yes, sometimes No
- Yes, often

- Yes, sometimes No
- Yes, often Not applicable

- Yes, sometimes No
- Yes, often Not applicable

- Yes, sometimes No
- Yes, often Not applicable

- Yes, sometimes
- Yes, often
- No

- Yes, sometimes
- Yes, often
- No

- Yes, sometimes
- Yes, often
- No

Born in Canada

- Nfld.Lab. Manitoba
- P.E.I. Sask.
- N.S. Alberta
- N.B. B.C.
- Quebec Yukon
- Ontario N.W.T.
- Nunavut

Born in Canada

- Nfld.Lab. Manitoba
- P.E.I. Sask.
- N.S. Alberta
- N.B. B.C.
- Quebec Yukon
- Ontario N.W.T.
- Nunavut

Born in Canada

- Nfld.Lab. Manitoba
- P.E.I. Sask.
- N.S. Alberta
- N.B. B.C.
- Quebec Yukon
- Ontario N.W.T.
- Nunavut

Born outside Canada
Specify country

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

Born outside Canada
Specify country

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

Born outside Canada
Specify country

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

- Canada, by birth
- Canada, by naturalization
- Other country — Specify

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

- Canada, by birth
- Canada, by naturalization
- Other country — Specify

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

- Canada, by birth
- Canada, by naturalization
- Other country — Specify

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

<input type="radio"/> No → Go to Question 13 <input type="radio"/> Yes	<input type="radio"/> No → Go to Question 13 <input type="radio"/> Yes	<input type="radio"/> No → Go to Question 13 <input type="radio"/> Yes																																																																																																																																			
<p style="text-align: center;">Year</p> <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="padding-left: 10px;"><i>If exact year is not known, enter best estimate.</i></td> </tr> </table>					<i>If exact year is not known, enter best estimate.</i>	<p style="text-align: center;">Year</p> <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="padding-left: 10px;"><i>If exact year is not known, enter best estimate.</i></td> </tr> </table>					<i>If exact year is not known, enter best estimate.</i>	<p style="text-align: center;">Year</p> <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="padding-left: 10px;"><i>If exact year is not known, enter best estimate.</i></td> </tr> </table>					<i>If exact year is not known, enter best estimate.</i>																																																																																																																				
				<i>If exact year is not known, enter best estimate.</i>																																																																																																																																	
				<i>If exact year is not known, enter best estimate.</i>																																																																																																																																	
				<i>If exact year is not known, enter best estimate.</i>																																																																																																																																	
<input type="radio"/> English only <input type="radio"/> French only <input type="radio"/> Both English and French <input type="radio"/> Neither English nor French	<input type="radio"/> English only <input type="radio"/> French only <input type="radio"/> Both English and French <input type="radio"/> Neither English nor French	<input type="radio"/> English only <input type="radio"/> French only <input type="radio"/> Both English and French <input type="radio"/> Neither English nor French																																																																																																																																			
<input type="radio"/> None OR <i>Specify other language(s)</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																																												<input type="radio"/> None OR <i>Specify other language(s)</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																																													<input type="radio"/> None OR <i>Specify other language(s)</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																																												
<input type="radio"/> English <input type="radio"/> French <i>Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																							<input type="radio"/> English <input type="radio"/> French <i>Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																							<input type="radio"/> English <input type="radio"/> French <i>Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																																																																																							
<input type="radio"/> No <input type="radio"/> Yes, English <input type="radio"/> Yes, French <i>Yes, Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																							<input type="radio"/> No <input type="radio"/> Yes, English <input type="radio"/> Yes, French <i>Yes, Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																							<input type="radio"/> No <input type="radio"/> Yes, English <input type="radio"/> Yes, French <i>Yes, Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																																																																																							
<input type="radio"/> English <input type="radio"/> French <i>Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																							<input type="radio"/> English <input type="radio"/> French <i>Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																							<input type="radio"/> English <input type="radio"/> French <i>Other — Specify</i> <table style="width:100%; border: none;"> <tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </table>																																																																																							

FOR INFORMATION ONLY

The census has collected information on the ancestral origins of the population for over 100 years to capture the composition of Canada's diverse population.

17 What were the ethnic or cultural origins of this person's **ancestors**?

An ancestor is usually more distant than a grandparent.

For example, Cree, Ojibway, Mi'kmaq (Micmac), Dene, Blackfoot, Inuit, Métis, Canadian, French, English, German, etc.

Specify as many origins as applicable using capital letters.

Four rows of 10 empty boxes for entering the person's ethnic or cultural origins.

Specify as many origins as applicable using capital letters.

Four rows of 10 empty boxes for entering the person's ethnic or cultural origins.

FOR INFORMATION ONLY

18 Is this person an Aboriginal person, that is, North American Indian, Métis or Inuit?

If "Yes", mark "⊗" the circle(s) that best describe(s) this person now.

- No → Continue with the next question
- Yes, North American Indian
- Yes, Métis
- Yes, Inuit

Go to Question 20

- No → Continue with the next question
- Yes, North American Indian
- Yes, Métis
- Yes, Inuit

Go to Question 20

19 Is this person:

Mark "⊗" more than one or specify, if applicable.

This information is collected to support programs that promote equal opportunity for everyone to share in the social, cultural and economic life of Canada.

- White
- Chinese
- South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- Black
- Filipino
- Latin American
- Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)
- Arab
- West Asian (e.g., Iranian, Afghan, etc.)
- Korean
- Japanese
- Other — Specify

One row of 10 empty boxes for specifying the person's ethnicity.

- White
- Chinese
- South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- Black
- Filipino
- Latin American
- Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)
- Arab
- West Asian (e.g., Iranian, Afghan, etc.)
- Korean
- Japanese
- Other — Specify

One row of 10 empty boxes for specifying the person's ethnicity.



Specify as many origins as applicable using capital letters.

Four rows of 10 empty boxes for text entry.

Specify as many origins as applicable using capital letters.

Four rows of 10 empty boxes for text entry.

Specify as many origins as applicable using capital letters.

Four rows of 10 empty boxes for text entry.

FOR INFORMATION ONLY

No → Continue with the next question

Yes, North American Indian

Yes, Métis

Yes, Inuit

Go to Question 20

No → Continue with the next question

Yes, North American Indian

Yes, Métis

Yes, Inuit

Go to Question 20

No → Continue with the next question

Yes, North American Indian

Yes, Métis

Yes, Inuit

Go to Question 20

White

Chinese

South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)

Black

Filipino

Latin American

Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)

Arab

West Asian (e.g., Iranian, Afghan, etc.)

Korean

Japanese

Other — Specify

Row of 10 empty boxes for text entry.

White

Chinese

South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)

Black

Filipino

Latin American

Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)

Arab

West Asian (e.g., Iranian, Afghan, etc.)

Korean

Japanese

Other — Specify

Row of 10 empty boxes for text entry.

White

Chinese

South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)

Black

Filipino

Latin American

Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)

Arab

West Asian (e.g., Iranian, Afghan, etc.)

Korean

Japanese

Other — Specify

Row of 10 empty boxes for text entry.



20

Is this person a member of an Indian Band/First Nation?

If "Yes", which Indian Band / First Nation?

- No
- Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

Grid for Indian Band/First Nation name

- No
- Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

Grid for Indian Band/First Nation name

21

Is this person a Treaty Indian or a Registered Indian as defined by the Indian Act of Canada?

- No
- Yes, Treaty Indian or Registered Indian

- No
- Yes, Treaty Indian or Registered Indian

22

Answer Questions 23 to 52 for each person aged 15 and over. (Persons for whom the "Age" box under Question 1 should have been checked.)



Continue only for each person aged 15 years and over (born before May 16, 1991).



Continue only for each person aged 15 years and over (born before May 16, 1991).

MOBILITY

23

Where did this person live 1 year ago, that is, on May 16, 2005?

Mark "X" one circle only.

Note:

For those who mark the third circle:

Identify the community, municipality, Indian reserve rather than the name of the Indian Band / First Nation.

For example:

- Lac Brochet 197A, Manitoba, rather than Northlands Band;
- Wabamun 133A, Alberta, rather than Paul Band;
- Rae-Edzo, Northwest Territories, rather than Dog Rib Rae Band;
- Fort Hope 64, Ontario, rather than Eabametoong First Nation;
- Mingan, Québec, rather than Les Innus de Ekuanitshit.

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve
- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

Specify name of:

Community, town, village, township, municipality or Indian reserve

Grid for community name

Grid for community name

Province / territory

Grid for province/territory

Postal code

Grid for postal code

- Lived **outside Canada**

Specify name of country

Grid for country name

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve
- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

Specify name of:

Community, town, village, township, municipality or Indian reserve

Grid for community name

Grid for community name

Province / territory

Grid for province/territory

Postal code

Grid for postal code




- Lived **outside Canada**

Specify name of country

Grid for country name

FOR INFORMATION ONLY



<input type="radio"/> No <input type="radio"/> Yes, member of an Indian Band/First Nation ↓ Specify Indian Band/First Nation (for example, Musqueam) <input type="text"/>	<input type="radio"/> No <input type="radio"/> Yes, member of an Indian Band/First Nation ↓ Specify Indian Band/First Nation (for example, Musqueam) <input type="text"/>	<input type="radio"/> No <input type="radio"/> Yes, member of an Indian Band/First Nation ↓ Specify Indian Band/First Nation (for example, Musqueam) <input type="text"/>
<input type="radio"/> No <input type="radio"/> Yes, Treaty Indian or Registered Indian	<input type="radio"/> No <input type="radio"/> Yes, Treaty Indian or Registered Indian	<input type="radio"/> No <input type="radio"/> Yes, Treaty Indian or Registered Indian
 Continue only for each person aged 15 years and over (born before May 16, 1991).	 Continue only for each person aged 15 years and over (born before May 16, 1991).	 Continue only for each person aged 15 years and over (born before May 16, 1991).
<input type="radio"/> Lived at the same address as now <input type="radio"/> Lived at a different address in the same community, town, village, township, municipality or Indian reserve <input type="radio"/> Lived in a different community, town, village, township, municipality or Indian reserve in Canada ↓ Specify name of: Community, town, village, township, municipality or Indian reserve <input type="text"/> <input type="text"/> Province/territory <input type="text"/> Postal code <input type="text"/> <input type="text"/> <input type="radio"/> Lived outside Canada ↓ Specify name of country <input type="text"/>	<input type="radio"/> Lived at the same address as now <input type="radio"/> Lived at a different address in the same community, town, village, township, municipality or Indian reserve <input type="radio"/> Lived in a different community, town, village, township, municipality or Indian reserve in Canada ↓ Specify name of: Community, town, village, township, municipality or Indian reserve <input type="text"/> <input type="text"/> Province/territory <input type="text"/> Postal code <input type="text"/> <input type="text"/> <input type="radio"/> Lived outside Canada ↓ Specify name of country <input type="text"/>	<input type="radio"/> Lived at the same address as now <input type="radio"/> Lived at a different address in the same community, town, village, township, municipality or Indian reserve <input type="radio"/> Lived in a different community, town, village, township, municipality or Indian reserve in Canada ↓ Specify name of: Community, town, village, township, municipality or Indian reserve <input type="text"/> <input type="text"/> Province/territory <input type="text"/> Postal code <input type="text"/> <input type="text"/> <input type="radio"/> Lived outside Canada ↓ Specify name of country <input type="text"/>

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

24 Where did this person live **5 years ago**, that is, on **May 16, 2001**?

Mark "⊗" one circle only.

Note:

For those who mark the third circle:

Identify the community, municipality, Indian reserve rather than the name of the Indian Band / First Nation.

For example:

- Lac Brochet 197A, Manitoba, rather than Northlands Band;
- Wabamun 133A, Alberta, rather than Paul Band;
- Rae-Edzo, Northwest Territories, rather than Dog Rib Rae Band;
- Fort Hope 64, Ontario, rather than Eabametoong First Nation;
- Mingan, Québec, rather than Les Innus de Ekuanitshit.

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve

- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

Specify name of:

Community, town, village, township, municipality or Indian reserve

Province / territory

Postal code

- Lived **outside Canada**

Specify name of country

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve

- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

Specify name of:

Community, town, village, township, municipality or Indian reserve

Province / territory

Postal code

- Lived **outside Canada**

Specify name of country

PLACE OF BIRTH OF PARENTS

25 Where was **each of** this person's parents born?

(a) **Father**

Mark "⊗" or specify country according to present boundaries.

Father

- Born in Canada
- Born outside Canada
Specify country

Father

- Born in Canada
- Born outside Canada
Specify country

(b) **Mother**

Mark "⊗" or specify country according to present boundaries.

Mother

- Born in Canada
- Born outside Canada
Specify country

Mother

- Born in Canada
- Born outside Canada
Specify country

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve

- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

↓ Specify name of:
Community, town, village, township, municipality or Indian reserve

Province/territory

Postal code

- Lived **outside Canada**

↓ Specify name of country

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve

- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

↓ Specify name of:
Community, town, village, township, municipality or Indian reserve

Province/territory

Postal code

- Lived **outside Canada**

↓ Specify name of country

- Lived at the **same** address as now
- Lived at a **different** address in the **same** community, town, village, township, municipality or Indian reserve

- Lived in a **different** community, town, village, township, municipality or Indian reserve **in Canada**

↓ Specify name of:
Community, town, village, township, municipality or Indian reserve

Province/territory

Postal code

- Lived **outside Canada**

↓ Specify name of country

FOR INFORMATION ONLY

Father

- Born in Canada
- Born outside Canada
Specify country

Father

- Born in Canada
- Born outside Canada
Specify country

Father

- Born in Canada
- Born outside Canada
Specify country

Mother

- Born in Canada
- Born outside Canada
Specify country

Mother

- Born in Canada
- Born outside Canada
Specify country

Mother

- Born in Canada
- Born outside Canada
Specify country



Remember, these questions are only for persons aged 15 and over.

EDUCATION

26 Has this person completed a **secondary (high) school diploma** or equivalent?

Examples of secondary (high) school equivalency certificates are General Educational Development (GED) and Adult Basic Education (ABE).

Secondary (high) school diploma or certificate

- Yes, secondary (high) school diploma
- Yes, secondary (high) school equivalency certificate
- No

Secondary (high) school diploma or certificate

- Yes, secondary (high) school diploma
- Yes, secondary (high) school equivalency certificate
- No

27 Has this person completed a **Registered Apprenticeship** or other **trades certificate** or diploma?

Mark "⊗" as many circles as applicable.

For example:
 • hairdressing
 • carpentry

Registered Apprenticeship or trades certificate or diploma

- Yes, Registered Apprenticeship certificate
- Yes, other trades certificate or diploma
- No

Registered Apprenticeship or trades certificate or diploma

- Yes, Registered Apprenticeship certificate
- Yes, other trades certificate or diploma
- No

28 Has this person completed a **college, CEGEP, or other non-university certificate** or diploma?

Mark "⊗" as many circles as applicable.

For example:
 • nursing assistant
 • law enforcement
 • early childhood education

College, CEGEP or other non-university certificate or diploma

- Yes, certificate or diploma from a program of less than 3 months
- Yes, certificate or diploma from a program of 3 months to less than 1 year
- Yes, certificate or diploma from a program of 1 to 2 years
- Yes, certificate or diploma from a program of more than 2 years
- No

College, CEGEP or other non-university certificate or diploma

- Yes, certificate or diploma from a program of less than 3 months
- Yes, certificate or diploma from a program of 3 months to less than 1 year
- Yes, certificate or diploma from a program of 1 to 2 years
- Yes, certificate or diploma from a program of more than 2 years
- No

29 Has this person completed a **university degree, certificate** or diploma?

Mark "⊗" as many circles as applicable.

University degree, certificate or diploma

- Yes, certificate or diploma below bachelor level
- Yes, bachelor's degree (including LL.B.)
- Yes, certificate or diploma above bachelor level
- Yes, master's degree
- Yes, degree in medicine, dentistry, veterinary medicine or optometry
- Yes, earned doctorate
- No

University degree, certificate or diploma

- Yes, certificate or diploma below bachelor level
- Yes, bachelor's degree (including LL.B.)
- Yes, certificate or diploma above bachelor level
- Yes, master's degree
- Yes, degree in medicine, dentistry, veterinary medicine or optometry
- Yes, earned doctorate
- No

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

Secondary (high) school diploma or certificate

- Yes, secondary (high) school diploma
- Yes, secondary (high) school equivalency certificate
- No

Secondary (high) school diploma or certificate

- Yes, secondary (high) school diploma
- Yes, secondary (high) school equivalency certificate
- No

Secondary (high) school diploma or certificate

- Yes, secondary (high) school diploma
- Yes, secondary (high) school equivalency certificate
- No

Registered Apprenticeship or trades certificate or diploma

- Yes, Registered Apprenticeship certificate
- Yes, other trades certificate or diploma
- No

Registered Apprenticeship or trades certificate or diploma

- Yes, Registered Apprenticeship certificate
- Yes, other trades certificate or diploma
- No

Registered Apprenticeship or trades certificate or diploma

- Yes, Registered Apprenticeship certificate
- Yes, other trades certificate or diploma
- No

FOR INFORMATION ONLY

College, CEGEP or other non-university certificate or diploma

- Yes, certificate or diploma from a program of less than 3 months
- Yes, certificate or diploma from a program of 3 months to less than 1 year
- Yes, certificate or diploma from a program of 1 to 2 years
- Yes, certificate or diploma from a program of more than 2 years
- No

College, CEGEP or other non-university certificate or diploma

- Yes, certificate or diploma from a program of less than 3 months
- Yes, certificate or diploma from a program of 3 months to less than 1 year
- Yes, certificate or diploma from a program of 1 to 2 years
- Yes, certificate or diploma from a program of more than 2 years
- No

College, CEGEP or other non-university certificate or diploma

- Yes, certificate or diploma from a program of less than 3 months
- Yes, certificate or diploma from a program of 3 months to less than 1 year
- Yes, certificate or diploma from a program of 1 to 2 years
- Yes, certificate or diploma from a program of more than 2 years
- No

University degree, certificate or diploma

- Yes, certificate or diploma below bachelor level
- Yes, bachelor's degree (including LL.B.)
- Yes, certificate or diploma above bachelor level
- Yes, master's degree
- Yes, degree in medicine, dentistry, veterinary medicine or optometry
- Yes, earned doctorate
- No

University degree, certificate or diploma

- Yes, certificate or diploma below bachelor level
- Yes, bachelor's degree (including LL.B.)
- Yes, certificate or diploma above bachelor level
- Yes, master's degree
- Yes, degree in medicine, dentistry, veterinary medicine or optometry
- Yes, earned doctorate
- No

University degree, certificate or diploma

- Yes, certificate or diploma below bachelor level
- Yes, bachelor's degree (including LL.B.)
- Yes, certificate or diploma above bachelor level
- Yes, master's degree
- Yes, degree in medicine, dentistry, veterinary medicine or optometry
- Yes, earned doctorate
- No



Remember, these questions are only for persons aged 15 and over.

30 What was the major field of study of the **highest** degree, certificate or diploma that this person completed?

Please be specific. For example:

- woodworking
- automobile mechanics
- business administration
- nursing
- social work
- early childhood education
- agricultural economics

Print in capital letters as follows:

C O M P U T E R E N

G I N E E R I N G T

E C H N O L O G Y

Major field of study of highest degree, certificate or diploma

OR

- No certificate or diploma (higher than high school) → **Go to Question 32**

Major field of study of highest degree, certificate or diploma

OR

- No certificate or diploma (higher than high school) → **Go to Question 32**

FOR INFORMATION ONLY

31 In what province, territory or country did this person complete his/her **highest** degree, certificate or diploma?

In Canada
Specify province or territory

OR

Outside Canada
Specify country

In Canada
Specify province or territory

OR

Outside Canada
Specify country

32 Has this person attended a school, college, CEGEP or university at any time since September 2005?

Mark "⊗" as many circles as applicable.

- Yes, attended elementary, junior high school or high school
- Yes, attended trade school, college, CEGEP or other non-university institution
- Yes, attended university
- No, did not attend school at any time since September 2005

- Yes, attended elementary, junior high school or high school
- Yes, attended trade school, college, CEGEP or other non-university institution
- Yes, attended university
- No, did not attend school at any time since September 2005



Remember, these questions are only for persons aged 15 and over.

FOR INFORMATION ONLY

Major field of study of highest degree, certificate or diploma

OR

- No certificate or diploma (higher than high school) → **Go to Question 32**

Major field of study of highest degree, certificate or diploma

OR

- No certificate or diploma (higher than high school) → **Go to Question 32**

Major field of study of highest degree, certificate or diploma

OR

- No certificate or diploma (higher than high school) → **Go to Question 32**

In Canada
Specify province or territory

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

OR

Outside Canada
Specify country

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

In Canada
Specify province or territory

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

OR

Outside Canada
Specify country

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

In Canada
Specify province or territory

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

OR

Outside Canada
Specify country

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

- Yes, attended elementary, junior high school or high school
- Yes, attended trade school, college, CEGEP or other non-university institution
- Yes, attended university
- No, did not attend school at any time since September 2005

- Yes, attended elementary, junior high school or high school
- Yes, attended trade school, college, CEGEP or other non-university institution
- Yes, attended university
- No, did not attend school at any time since September 2005

- Yes, attended elementary, junior high school or high school
- Yes, attended trade school, college, CEGEP or other non-university institution
- Yes, attended university
- No, did not attend school at any time since September 2005



Remember, these questions are only for persons aged 15 and over.

HOUSEHOLD ACTIVITIES

Note:

The next question has three parts and asks about household activities **last week**, that is Sunday, May 7, to Saturday, May 13, 2006. Household activities include housework, child care and helping seniors. Report all time spent on each activity, even if two or more activities took place at the same time.

33 (a) **Last week**, how many hours did this person spend doing **unpaid** housework, yard work or home maintenance for members of this household, or others?

Some examples include: preparing meals, washing the car, doing laundry, cutting the grass, shopping, household planning, etc.

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

FOR INFORMATION ONLY

(b) **Last week**, how many hours did this person spend looking after one or more of this person's own children, or the children of others, **without pay**?

Some examples include: bathing or playing with young children, driving children to sports activities or helping them with homework, talking with teens about their problems, etc.

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

(c) **Last week**, how many hours did this person spend providing **unpaid** care or assistance to one or more seniors?

Some examples include: providing personal care to a senior family member, visiting seniors, talking with them on the telephone, helping them with shopping, banking or with taking medication, etc.

- None
- Less than 5 hours
- 5 to 9 hours
- 10 to 19 hours
- 20 hours or more

- None
- Less than 5 hours
- 5 to 9 hours
- 10 to 19 hours
- 20 hours or more



Remember, these questions are only for persons aged 15 and over.

FOR INFORMATION ONLY

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 14 hours
- 15 to 29 hours
- 30 to 59 hours
- 60 hours or more

- None
- Less than 5 hours
- 5 to 9 hours
- 10 to 19 hours
- 20 hours or more

- None
- Less than 5 hours
- 5 to 9 hours
- 10 to 19 hours
- 20 hours or more

- None
- Less than 5 hours
- 5 to 9 hours
- 10 to 19 hours
- 20 hours or more



Remember, these questions are only for persons aged 15 and over.

LABOUR MARKET ACTIVITIES

The next few questions ask about paid work.

34 Last week, how many hours did this person spend working for pay **or** in self-employment?

Please enter the total number of hours worked for pay or in self-employment at all jobs held last week.

Include:

- working for wages, salary, tips or commission;
- making, selling or trading arts and crafts;
- running a business;
- trapping, hunting and fishing (except as a leisure activity);
- fixing gear used to hunt, fish or trap;
- working as a guide.

Number of hours (to the nearest hour)



Go to Question 40

OR

None



Continue with the next question

Number of hours (to the nearest hour)



Go to Question 40

OR

None



Continue with the next question

FOR INFORMATION ONLY

35 Last week, was this person on temporary lay-off or absent from his/her job or business?

Mark "⊗" one circle only.

No

Yes, on temporary lay-off from a job to which this person expects to return

Yes, on vacation, ill, on strike or locked out, or absent for other reasons

No

Yes, on temporary lay-off from a job to which this person expects to return

Yes, on vacation, ill, on strike or locked out, or absent for other reasons

36 Last week, did this person have definite arrangements to start a new job within the next four weeks?

No

Yes

No

Yes



Remember, these questions are only for persons aged 15 and over.

Number of hours (to the nearest hour)



**Go to
Question 40**

OR

None



**Continue with the
next question**

Number of hours (to the nearest hour)



**Go to
Question 40**

OR

None



**Continue with the
next question**

Number of hours (to the nearest hour)



**Go to
Question 40**

OR

None



**Continue with the
next question**

FOR INFORMATION ONLY

No

Yes, on temporary lay-off from a job to which this person expects to return

Yes, on vacation, ill, on strike or locked out, or absent for other reasons

No

Yes, on temporary lay-off from a job to which this person expects to return

Yes, on vacation, ill, on strike or locked out, or absent for other reasons

No

Yes, on temporary lay-off from a job to which this person expects to return

Yes, on vacation, ill, on strike or locked out, or absent for other reasons

No

Yes

No

Yes

No

Yes



Remember, these questions are only for persons aged 15 and over.

37 Did this person look for paid work **during the past four weeks?**

For example, did this person contact an employment centre, check with employers, place or answer newspaper ads, etc.?

Mark "⊗" one circle only.

- No → **Go to Question 39**
- Yes, looked for full-time work
- Yes, looked for part-time work (less than 30 hours per week)

- No → **Go to Question 39**
- Yes, looked for full-time work
- Yes, looked for part-time work (less than 30 hours per week)

FOR INFORMATION ONLY

38 Could this person have started a job **last week** had one been available?

Mark "⊗" one circle only.

- Yes, could have started a job
- No, already had a job
- No, because of temporary illness or disability
- No, because of personal or family responsibilities
- No, going to school
- No, other reasons

- Yes, could have started a job
- No, already had a job
- No, because of temporary illness or disability
- No, because of personal or family responsibilities
- No, going to school
- No, other reasons

39 When did this person last work for pay **or** in self-employment, even for a few days?

Mark "⊗" one circle only.

- In 2006 → **Continue with the next question**
- In 2005 → **Continue with the next question**
- Before 2005 → **Go to Question 51**
- Never → **Go to Question 51**

- In 2006 → **Continue with the next question**
- In 2005 → **Continue with the next question**
- Before 2005 → **Go to Question 51**
- Never → **Go to Question 51**



Remember, these questions are only for persons aged 15 and over.

- No → **Go to Question 39**
- Yes, looked for full-time work
- Yes, looked for part-time work (less than 30 hours per week)

- No → **Go to Question 39**
- Yes, looked for full-time work
- Yes, looked for part-time work (less than 30 hours per week)

- No → **Go to Question 39**
- Yes, looked for full-time work
- Yes, looked for part-time work (less than 30 hours per week)

FOR INFORMATION ONLY

- Yes, could have started a job
- No, already had a job
- No, because of temporary illness or disability
- No, because of personal or family responsibilities
- No, going to school
- No, other reasons

- Yes, could have started a job
- No, already had a job
- No, because of temporary illness or disability
- No, because of personal or family responsibilities
- No, going to school
- No, other reasons

- Yes, could have started a job
- No, already had a job
- No, because of temporary illness or disability
- No, because of personal or family responsibilities
- No, going to school
- No, other reasons

- In 2006 → **Continue with the next question**
- In 2005 → **Continue with the next question**
- Before 2005 → **Go to Question 51**
- Never → **Go to Question 51**

- In 2006 → **Continue with the next question**
- In 2005 → **Continue with the next question**
- Before 2005 → **Go to Question 51**
- Never → **Go to Question 51**

- In 2006 → **Continue with the next question**
- In 2005 → **Continue with the next question**
- Before 2005 → **Go to Question 51**
- Never → **Go to Question 51**



Remember, these questions are only for persons aged 15 and over.

Note: Questions 40 to 48 refer to this person's job or business last week. If this person held no job last week, answer for the job of longest duration since January 1, 2005. If this person held more than one job last week, answer for the job at which he /she worked the **most hours.**

40 For whom did this person work?

For self-employed persons, enter the name of their business. If the business does not have a name, enter the person's name.

Print in capital letters as follows:

Name of firm, government agency, etc.

A B C C O N C R E T

E P R O D U C T S

L I M I T E D

Name of firm, government agency, etc.

Section, plant, department, etc. (if applicable)

Name of firm, government agency, etc.

Section, plant, department, etc. (if applicable)

41 What kind of business, industry or service was this?

Please give details. For example:

- new home construction
- Indian Band police
- fishing, trapping
- elementary school
- community health centre
- freight trucking company
- independent artist
- hair salon

Kind of business, industry or service

Kind of business, industry or service

FOR INFORMATION ONLY

42 What was this person's work or occupation?

Please be specific. For example:

- carpenter
- police officer
- trapper
- elementary school teacher
- community health nurse
- truck driver
- artisan
- hairdresser

(If in the Armed Forces, give rank.)

Occupation

Occupation

43 In this work, what were this person's main activities?

Please give details. For example:

- building houses
- law enforcement
- skinning animals
- teaching grade 2
- treating patients
- driving a truck
- carving soapstone
- cutting hair

Main activities

Main activities



Remember, these questions are only for persons aged 15 and over.

Name of firm, government agency, etc.

Section, plant, department, etc. (if applicable)

Kind of business, industry or service

Occupation

Main activities

Name of firm, government agency, etc.

Section, plant, department, etc. (if applicable)

Kind of business, industry or service

Occupation

Main activities

Name of firm, government agency, etc.

Section, plant, department, etc. (if applicable)

Kind of business, industry or service

Occupation

Main activities

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

44 In this job or business, was this person mainly:

Mark “⊗” one circle only.

working for wages, salary, tips or commission?

▶ Go to Question 46

working without pay for his / her spouse or another relative in a family farm or business?

▶ Go to Question 46

self-employed without paid help (alone or in partnership)?

self-employed with paid help (alone or in partnership)?

working for wages, salary, tips or commission?

▶ Go to Question 46

working without pay for his / her spouse or another relative in a family farm or business?

▶ Go to Question 46

self-employed without paid help (alone or in partnership)?

self-employed with paid help (alone or in partnership)?

45 If self-employed, was this person’s farm or business incorporated?

No

Yes

No

Yes

46 At what address did this person **usually** work **most of the time?**

Note:

For those who mark the fourth circle:

Identify the community, municipality, Indian reserve rather than the name of the Indian Band / First Nation.

For example:

- Lac Brochet 197A, Manitoba, rather than Northlands Band;
- Wabamun 133A, Alberta, rather than Paul Band;
- Rae-Edzo, Northwest Territories, rather than Dog Rib Rae Band;
- Fort Hope 64, Ontario, rather than Eabametoong First Nation;
- Mingan, Québec, rather than Les Innus de Ekuanitshit.

If the address of work is different than the address of the employer, please provide the address where this person actually works (e.g., school teachers should provide the address of their school, not the address of the school board).

Worked at home (including farms)

▶ Go to Question 48

Worked outside Canada

▶ Go to Question 48

No fixed workplace address

▶ Go to Question 47

Worked at the address specified below:
Specify complete address

Street address

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

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

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

Community, town, village, township, municipality or Indian reserve

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

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

Province / territory

--	--	--	--	--

Postal code

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

Worked at home (including farms)

▶ Go to Question 48

Worked outside Canada

▶ Go to Question 48

No fixed workplace address

▶ Go to Question 47

Worked at the address specified below:
Specify complete address

Street address

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

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

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

Community, town, village, township, municipality or Indian reserve

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

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

Province / territory

--	--	--	--	--

Postal code

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

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

working for wages, salary, tips or commission?

▶ **Go to Question 46**

working without pay for his / her spouse or another relative in a family farm or business?

▶ **Go to Question 46**

self-employed without paid help (alone or in partnership)?

self-employed with paid help (alone or in partnership)?

No

Yes

working for wages, salary, tips or commission?

▶ **Go to Question 46**

working without pay for his / her spouse or another relative in a family farm or business?

▶ **Go to Question 46**

self-employed without paid help (alone or in partnership)?

self-employed with paid help (alone or in partnership)?

No

Yes

working for wages, salary, tips or commission?

▶ **Go to Question 46**

working without pay for his / her spouse or another relative in a family farm or business?

▶ **Go to Question 46**

self-employed without paid help (alone or in partnership)?

self-employed with paid help (alone or in partnership)?

No

Yes

Worked at home (including farms)

▶ **Go to Question 48**

Worked outside Canada

▶ **Go to Question 48**

No fixed workplace address

▶ **Go to Question 47**

Worked at the address specified below:
Specify complete address

Street address

Community, town, village, township, municipality or Indian reserve

Province / territory

Postal code

Worked at home (including farms)

▶ **Go to Question 48**

Worked outside Canada

▶ **Go to Question 48**

No fixed workplace address

▶ **Go to Question 47**

Worked at the address specified below:
Specify complete address

Street address

Community, town, village, township, municipality or Indian reserve

Province / territory

Postal code

Worked at home (including farms)

▶ **Go to Question 48**

Worked outside Canada

▶ **Go to Question 48**

No fixed workplace address

▶ **Go to Question 47**

Worked at the address specified below:
Specify complete address

Street address

Community, town, village, township, municipality or Indian reserve

Province / territory

Postal code

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

47 How did this person **usually** get to work?

If this person used more than one method of transportation, mark the one used for most of the travel distance.

- Car, truck or van — as driver
- Car, truck or van — as passenger
- Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- Walked to work
- Bicycle
- Motorcycle
- Taxicab
- Other method

- Car, truck or van — as driver
- Car, truck or van — as passenger
- Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- Walked to work
- Bicycle
- Motorcycle
- Taxicab
- Other method

48 (a) In this job, what language did this person use **most often**?

- English
- French
- Other — Specify

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

- English
- French
- Other — Specify

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

(b) Did this person use any other languages **on a regular basis** in this job?

- No
- Yes, English
- Yes, French
- Yes, Other — Specify

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

- No
- Yes, English
- Yes, French
- Yes, Other — Specify

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

FOR INFORMATION ONLY



Remember, these questions are only for persons aged 15 and over.

- Car, truck or van — as driver
- Car, truck or van — as passenger
- Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- Walked to work
- Bicycle
- Motorcycle
- Taxicab
- Other method

- Car, truck or van — as driver
- Car, truck or van — as passenger
- Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- Walked to work
- Bicycle
- Motorcycle
- Taxicab
- Other method

- Car, truck or van — as driver
- Car, truck or van — as passenger
- Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- Walked to work
- Bicycle
- Motorcycle
- Taxicab
- Other method

FOR INFORMATION ONLY

- English
- French
- Other — *Specify*

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

- English
- French
- Other — *Specify*

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

- English
- French
- Other — *Specify*

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

- No
- Yes, English
- Yes, French
- Yes, Other — *Specify*

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

- No
- Yes, English
- Yes, French
- Yes, Other — *Specify*

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

- No
- Yes, English
- Yes, French
- Yes, Other — *Specify*

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



Remember, these questions are only for persons aged 15 and over.

49 In how many **weeks** did this person work in **2005**?

Please enter the total number of weeks worked for pay or in self-employment at all jobs held in 2005.

Include **those weeks** in which this person:

- was **on vacation** or **sick leave with pay**;
- worked **full time** or **part time**;
- worked for **wages, salary, tips** or **commission**;
- was **self-employed**;
- worked directly towards the operation of a **family farm or business** without formal pay arrangements.

None → **Go to Question 51**

OR

← Number of weeks

None → **Go to Question 51**

OR

← Number of weeks

FOR INFORMATION ONLY

50 During **most** of those **weeks**, did this person work **full time** or **part time**?

Mark "⊗" one circle only.

Full time (30 hours or more per week)

Part time (less than 30 hours per week)

Full time (30 hours or more per week)

Part time (less than 30 hours per week)

INCOME IN 2005

51 To save time, each person can give Statistics Canada permission to use the income information already available in his/her income tax files instead of answering **Question 52**.

- **This option is only available for persons who filed a tax return for the year ending December 31, 2005.**
- Please note that your income tax information will be used for statistical purposes only.

Does this person give Statistics Canada permission to use the income information already available in his/her income tax files for the year ending December 31, 2005?

Yes → **Person 1 agrees. Go to Question 53**

No → **Continue with Question 52**

Yes → **Person 2 agrees. Go to Question 53**

No → **Continue with Question 52**



Remember, these questions are only for persons aged 15 and over.

None → **Go to Question 51**

OR

← Number of weeks

None → **Go to Question 51**

OR

← Number of weeks

None → **Go to Question 51**

OR

← Number of weeks

FOR INFORMATION ONLY

Full time (30 hours or more per week)

Part time (less than 30 hours per week)

Full time (30 hours or more per week)

Part time (less than 30 hours per week)

Full time (30 hours or more per week)

Part time (less than 30 hours per week)

Yes → **Person 3 agrees.
Go to Question 53**

No → **Continue with Question 52**

Yes → **Person 4 agrees.
Go to Question 53**

No → **Continue with Question 52**

Yes → **Person 5 agrees.
Go to Question 53**

No → **Continue with Question 52**



**STEP
F**

The following questions are about your dwelling.

A **dwelling** is a separate set of living quarters with a **private entrance** from the outside or from a common hallway or stairway inside the building. This entrance should not be through someone else's living quarters.

H1. Who pays the rent or mortgage, taxes, electricity, etc., for this dwelling?

If more than one person contributes to such payments, mark "X" as many circles as apply.

- Person 1
- Person 2
- Person 3
- Person 4
- Person 5
- A person who is listed on another questionnaire for this dwelling
- A person who does not live here

H2. Only ask Question H2 (a) if you are on an Indian reserve or in an Indian settlement. Otherwise, go to Question H2 (b).

(a) Is this dwelling band housing, rented or owned by you or a member of this household?

- Band housing
- Owned
- Rented



Go to Question H3

(b) Is this dwelling rented or owned by you or a member of this household?

- Owned
- Rented

H3. (a) How many rooms are there in this dwelling?

← Number of rooms

Include kitchen, bedrooms, finished rooms in attic or basement, etc.

Do not count bathrooms, halls, and attached sheds.

FOR INFORMATION ONLY

(b) How many of these rooms are bedrooms?

← Number of bedrooms

H4. When was this dwelling originally built?

Mark the period in which the building was completed, not the time of any later remodelling, additions or conversions. If year is not known, give best estimate.

- 1920 or before
- 1921-1945
- 1946-1960
- 1961-1970
- 1971-1980
- 1981-1985
- 1986-1990
- 1991-1995
- 1996-2000
- 2001-2006

H5. Is this dwelling in need of any repairs?

Do not include desirable remodelling or additions.

- No, only **regular maintenance** is needed (painting, furnace cleaning, etc.)
- Yes, **minor repairs** are needed (missing or loose floor tiles, bricks or shingles, defective steps, railing or siding, etc.)
- Yes, **major repairs** are needed (defective plumbing or electrical wiring, structural repairs to walls, floors or ceilings, etc.)



Are you or anyone in this dwelling a farm operator living on the farm that you or they operate?

If "yes", mark here and go to Step G. If the answer is "no", continue with question H6.

H6. For this dwelling, what are the YEARLY payments (last 12 months) for:

(a) electricity? None
 Included in rent or other payments
OR \$.00 per year

(b) oil, gas, coal, wood or other fuels? None
 Included in rent or other payments
OR \$.00 per year

(c) water and other municipal services? None
 Included in rent or other payments
OR \$.00 per year

FOR INFORMATION ONLY

If "Band housing" was checked in Question H2 (a), **Go to Step G on next page.**
If "Rented" was checked in Question H2 (a) or H2 (b), **Continue with Question H7.**
If "Owned" was checked in Question H2 (a) or H2 (b), **Go to Question H8.**

H7. For RENTERS only:

What is the **monthly rent** paid for this dwelling? Rented without payment of cash rent
OR \$.00 per month

H8. For OWNERS only, ask parts (a) through (f):

(a) What are the total regular **monthly** mortgage or loan payments for this dwelling? None → **Go to part (c)**
OR \$.00 per month

(b) Are the property taxes (municipal and school) included in the amount shown in part (a)? Yes → **Go to part (d)**
 No

(c) What are the estimated **yearly** property taxes (municipal and school) for this dwelling? None
OR \$.00 per year

(d) If you were to sell this dwelling now, for how much would you expect to sell it? \$.00

(e) Is this dwelling part of a registered condominium? Yes → **Continue with part (f)**
 No → **Go to Step G on next page**

(f) What are the **monthly** condominium fees? None
OR \$.00 per month



**STEP
G**

Thank the respondent for his/her cooperation, then read the statement below.

You can ask to see the information you gave about yourself on your 2006 Census questionnaire after November 2006. If you wish, I can tell you where to write.

If respondent asks, give the address:
Privacy Coordinator, Statistics
Canada, 25th floor, R.H. Coats
Building, Ottawa, Ontario K1A 0T6.

COMMENTS

FOR INFORMATION ONLY

THE LAW PROTECTS WHAT YOU TELL US

The confidentiality of your census responses is protected by law. All Statistics Canada employees have taken an oath of secrecy. Your personal census information cannot be given to anyone outside Statistics Canada without your consent.

Your census information will be retained in accordance with legislative requirements and will be stored securely.

