SIKSIKA HOUSING SERVICE AREA
CENSUS 2021 FORM

This census form is for the purpose of gathering information from Siksika members residing in homes in Siksika Nation. Information gathered will be private and strictly confidential. Information will be used to update department's database.

MAP: _____ HOUSE NUMBER: _____

REGISTERED OCCUPANT: _____

BAND NAME: _____ BAND #: _____

MAILING ADDRESS: _____

CONTACT NUMBER: _____ EMAIL: _____

INCOME STATUS TO BE COMPLETED BY HEAD OF HOUSEHOLD ONLY. CHECK OFF WHICH INCOME APPLIES TO YOU.		
INCOME INFORMATION	**YES**	**NO**
Employed (Part-time, Full-time, Seasonal, Contract)		
Social Assistance		
AISH		
Pension		
Unemployed & No Income		

LIST ALL OCCUPANTS RESIDING IN UNIT (PLEASE PRINT INFORMATION)					
OCCUPANT NAME	**RELATIONSHIP**	**AGE**	**BAND NAME**	**IS THE PERSON DISABLED (CHECK OFF YES OR NO)**	
				YES	**NO**

OCCUPANT SIGNATURE: _____ DATE SIGNED: _____

Thank you for completing the Census Form