



# 2007 ECONOMIC CENSUS

## Classification Form

**DUE DATE**  
**FEBRUARY 12, 2008**

ED-61190

**INFORMATION COPY  
DO NOT USE TO REPORT**

**Mail** your completed form to:

**U.S. CENSUS BUREAU**  
1201 East 10th Street  
Jeffersonville, IN 47134-0001

**Need help or have questions  
about filling out this form?**

**Visit** [www.census.gov/econhelp](http://www.census.gov/econhelp)

- OR -

**Write** to the address above.  
Include your 11-digit Census File  
Number (CFN) printed in the  
mailing address.

(Please correct any errors in this mailing address.)

**YOUR RESPONSE IS REQUIRED BY LAW.** Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ballpoint pen.
- Please center numbers in their respective boxes.
- Do not use pencil or felt-tip pen.
- Do not put slashes through 0 or 7.
- Place an "X" inside the box.

Examples:  0 1 2 3 4 5 6 7 8 9

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed.

**1** Not Applicable.

**2** PHYSICAL LOCATION

**A.** Is this establishment's physical location the same as shown in the mailing address?  
(P.O. Box and rural route addresses are not physical locations.)

0031  Yes - Go to line B

0032  No - Enter physical location

0035 Number and street

0036 City, town, village, etc.

0037 State

0038 ZIP Code

**B.** Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?  
(Mark "X" only ONE box.)

0041  Yes

0042  No

0043  No legal boundaries

0044  Do not know

**C.** In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

0046  City, village, or borough

0047  Town or township

0048  Other

0024  Do not know

61190013

**3 OPERATIONAL STATUS**

Which ONE of the following best describes this establishment's operational status at the end of 2007?  
(Mark "X" only ONE box.)

0011  In operation

0013  Temporarily or seasonally inactive

0014  Ceased operation - Give date at right

Month	Day	Year

0015  Sold or leased to another operator - Give date at right  
AND enter name and address of new owner or operator  
and Employer Identification Number (EIN) below

0018

0060 Name of new owner or operator		0061 EIN (9 digits)		
			-	
0062 Mailing address (Number and street, P.O. Box, etc.)				
0063 City, town, village, etc.		0064 State	0065 ZIP Code	
				-

0016  Other - Specify

0815

**4 - 18** Not Applicable.

**19 KIND OF BUSINESS OR ACTIVITY**

Which ONE of the following best describes this establishment's principal kind of business or activity in 2007?  
(Mark "X" only ONE box.)

**Business, computer, and management training services, excluding colleges and universities**

- 0700 611 410 00 1  Business, secretarial, or court reporting schools
- 611 420 00 2  Computer training services excluding computer repair training
- 611 519 20 1  Computer repair training services
- 611 430 00 1  Professional and management development training services, including providers of seminars or instruction for the enhancement of management skills
- 777 611 01 1  Other business, computer, or management training services - Specify

0701

**Technical and trade schools**

- 611 511 00 1  Cosmetology or beauty schools
- 611 511 00 2  Barber colleges or schools
- 611 513 00 1  Apprenticeship training services
- 611 519 30 1  Truck driving schools
- 611 519 10 2  Commercial art or graphic art schools
- 611 519 10 3  Dental technicians, medical technicians, nursing aids, or massage therapy schools
- 611 512 00 1  Flight training services

CONTINUE WITH 19 ON PAGE 3

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

**19** KIND OF BUSINESS OR ACTIVITY - Continued

**Technical and trade schools - Continued**

- 0700 624 310 00 3  Vocational rehabilitation facility, including sheltered workshops (*Exclude schools.*)
- 777 611 01 2  Other trade or technical schools or instruction - *Specify* ↴

0701

**Other schools and instruction**

- 611 610 10 1  Dance schools or studios providing instruction, including children's and professionals'
- 611 610 20 1  Art, drama, music, or other fine arts schools
- 611 620 00 1  Sports and recreation instruction services
- 611 630 00 1  Language schools
- 611 691 00 1  Exam preparation, including college board preparation instruction services
- 611 691 00 2  Tutoring services or academic skills learning centers
- 611 692 00 1  Automobile driving schools
- 624 410 00 1  Child day care services, including those with preschool
- 624 410 00 5  Head start programs
- 611 110 00 1  Elementary or secondary schools
- 611 210 00 1  Junior colleges or community colleges (granting associate degrees or certificates)
- 611 310 00 1  Colleges, universities, or professional schools (granting academic degrees)
- 777 611 01 3  All other schools and instruction services - *Specify* ↴

0701

**Educational support services**

- 519 120 00 4  Libraries
- 611 710 10 1  Educational consultants, evaluating and advising students and families on recommended course of study, choice of schools or colleges, financial aid, etc.
- 611 710 20 1  Educational testing services
- 611 710 10 2  Educational curriculum development services
- 777 611 01 4  Other education-related services - *Specify* ↴

0701

CONTINUE WITH **19** ON PAGE 4

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**19** KIND OF BUSINESS OR ACTIVITY - Continued

**Other kind of business or activity**

- 0700 713 990 80 3  Day camps, excluding instructional camps
- 773 000 00 2  Other kind of business or activity - *Specify* ↴

0701

**20-29** Not Applicable.

REMARKS *(Please use this space for any explanations that may be essential in understanding your reported data.)*

**30** CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.

Is the time period covered by this report a calendar year?

- Yes
- No - Enter time period covered →

FROM	Month	Year	TO	Month	Year
	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>

Name of person to contact regarding this report				Title			
<input type="text"/>				<input type="text"/>			

Telephone	Area code	Number		Extension	Fax	Area code	Number	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>

Internet e-mail address				Date completed	Month	Day	Year
<input type="text"/>					<input type="text"/>	<input type="text"/>	<input type="text"/>

**Thank you for completing your 2007 ECONOMIC CENSUS form.**  
**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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