



2026 - GENERAL CENSUS FORM

for Nuba People in United States

SECTION 1: PERSONAL INFORMATION

Full Name: _____	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: _____
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	Phone Number: _____	
If married, Spouses Full Name: _____	Email: _____	
Residential Address: _____	City, State, Zip Code: _____	

SECTION 2: FAMILY AND HOUSEHOLD INFORMATION

Dependents (between 1 - 25)

Full Name	Infants - 1 - 7		Teenagers - 8 - 14		Youths - 15 - 25		Adults - 26 & Plus	
	Male	Female	Male	Female	Male	Female	Male	Female

Level of Education

Primary Secondary Diploma Bachelor Master Doctorate

Field of Study / Profession: _____

Hobbies / Talents _____

Immigration Status

U.S Citizen Refugee Asylee Others _____

Year Arrived in United States _____

Country of First Asylum _____

First State of Residence in USA _____

SECTION 3: PLACE OF ORIGIN (HOMELAND)

Sate of Origin: South Kordofan/Nuba Mountains Others _____

County/District _____

Home village / Town: _____

Tribal/Ethnic Group: _____

Language & Religion

List Spoken Language _____

Religious Affiliation Christian Muslim Traditional None Others

SECTION 4: COMMUNITY INVOLVEMENT

Are you currently involved in any community or faith-based organization? Yes No

If yes, Name of Organization (s): _____

Would like to Join NMIA-USA programs or of its Standing Committees? Yes No

Area(s) of your Interests: Education Health Women Empowerment Youth Connection Economic Development

Cultural Heritages Advocacy & Human Rights Reconciliation & Peacebuilding Humanitarian Affairs Foreign Relations

Do you or your family have any special needs Yes No

If Yes, Please Specify: _____

SECTION 5: CONSENT & DECLARATION

I, the undersigned, voluntarily provide this information to assist the **Nuba Mountains International Association – USA (NMIA-USA)** in its mission to serve, support, and unify the Nuba community in the United States. I understand that the information provided will be used strictly for organizational planning, research, and community service purposes and will remain confidential.

Signature: _____

Date: _____

SECTION 6: FOR OFFICE USE ONLY

Census Enumerator Name: _____

Date Collected: _____

State Chapter: _____

Verified By: _____

Submit Complete Forms To: Nuba Mountains International Association – USA

National Secretariat – Census Taskforce

Email: _____

Website: www.nmia.org

Contact: _____

"Counting our people is the first step toward knowing our strength and shaping our future."