



# REGISTRANT DATA FORM

Date \_\_\_\_\_

Name \_\_\_\_\_ New  Change  Remove  County Transfer   
 (Person Submitting Data)

**SECTIONS 1, 2 AND 3 MUST BE COMPLETED**

1. Register Number		2. Social Security Number	
3. Registrant Name			
(Last)		(First)	
		(MI)	
4. Sex	5. Maiden Name	6. Date of Birth	
			(MM/DD/YYYY)
7. Area	8. County Number		
9. Address			
(Street )		(City)	(State) (Zip Code)
10. Telephone	11. In Institution		
12. Race (Select All that Apply)		White <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/>	
13. Language Preference			
*14. Vision Group	15. Hearing Impairment Code		
*16. Diagnosis	*17. Etiology	18. Deceased	
19. Remove from Register	20. Reason	21. Re-add to Register	

**\*CODED BY REGISTRAR OF THE BLIND (SEE SECOND PAGE FOR CODES)**

## HEARING IMPARIMENT CODES USED ON REGISTER

**Blank- Not known            0- No hearing loss**

### **B/VI Due to Retinitis Pigmentosa with:**

- 1- Mild hearing loss
- 2- Moderate to severe loss
- 3- Profound hearing loss

### **B/VI Due to other causes with:**

- 4- Profound pre-lingual hearing loss (occurring before 3rd birthday)
- 5- Profound hearing loss occurring between ages 3 - 21
- 6- Profound hearing loss occurring after age 21
- 7- Moderate to severe hearing loss occurring prior to age 21
- 8- Moderate to severe hearing loss after age 21
- 9- Mild hearing loss

## REMOVAL CODES

- 1- Death
- 2- Left North Carolina
- 3- Vision restored (attach eye report verifying the improved vision)
- 6- Unable to locate. This code will not be accepted unless the following data are reported on the back of the DSB 1010:
  - a. Attempt to contact registrant by phone, and
  - b. Letter to registrant has been returned undeliverable and
  - c. DSS records have been searched (ex. Medicaid and/ or Food Stamp and no record of registrant is available).
- 7- Administrative; duplicate

### **SEX CODES**

M = Male  
F = Female

### **IN INSTITUTION**

1 = In public or private  
licensed home or  
institution  
2 = Not in an institution

### **DECEASED CODE**

Y = Yes  
Blank = Not deceased

## LANGUAGE PREFERENCE CODES

EN = English   SP = Spanish   AR = Arabic   CA = Cambodian   CH = Chinese   FR = French  
FC = French Creole   GE = German   GR = Greek   GU = Gujarati   HI = Hindi   HM = Hmong  
HU = Hungarian   IT = Italian   JA = Japanese   KR = Korean   LA = Laotian   MI = Miao  
MK = Mon-Khmer   PE = Persian   PO = Polish   PG = Portuguese   PC = Portuguese Creole  
RU = Russian   SC = Serbo-Croatian   TA = Tagalog   TH = Thai   UR = Urdu   VI = Vietnamese  
OT = Other