D. What has been your usual occupation or job—the one you have worked at the longest?

1. Job occupation

2. Number of years employed in this occupation

3. Position/job title

4. Business, field or industry

(Record on lines the years in which you have worked in any of these industries, e.g. 1960-1969)

Have you ever worked:

E. In a mine? 

F. In a quarry? 

G. In a foundry? 

H. In a pottery? 

I. In a cotton, flax or hemp mill? 

J. With asbestos? 

17. PAST MEDICAL HISTORY

A. Do you consider yourself to be in good health?

   If "NO" state reason

B. Have you any defect of vision?

   If "YES" state nature of defect

C. Have you any hearing defect?

   If "YES" state nature of defect