

Personal History & Preferences

Participant Full Name:		Nick Name:	
Place of Birth:	Birthday:	Native Language:	
Number of Siblings:	Birth Order:	Siblings still living?	
Age of participant when pa	arents passed away	? Mom:Dad:	
Married?At what age?	How many years	?How long since lost spouse?	
Children? (names & living v	where?)		
Has participant lost any children?			
Does participant have relationship with all his/her children?			
Please describe any broker	۱ relationships:		
Life-changing events?			
Previous Occupation(s):			
Any prejudice or racist ten	dencies? Tow	ard who/what?	
Political Affiliation? Religious Affiliation?			
Favorite Cause or Charity?			
		vorite TV Show?	
Favorite Music Genre?	Fav	orite Musician?	

Participant Full Name: _____

Favorite Past Hobby?		
Favorite Current Hobby?		
Animal likes/dislikes?		
Enjoys young children? Enjoys Reminiscing?Enjoys socialization?		
Enjoys board games/cards? which ones?		
Enjoys live theater?Enjoys baking/cooking? Enjoys gardening?		
Enjoys exercise? Enjoys being touched/massaged?		
Favorite Color? Favorite time of year?		
Enjoys watching televised sports? which ones?		
Food likes?		
Food dislikes?		
Takes naps? What time/times? In bed or recliner?		
Other important information about your loved one:		