

# History Questionnaire

## Details

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Current Age: \_\_\_\_\_

Address: \_\_\_\_\_

How old were you  
when you left  
home: \_\_\_\_\_

## Questions

Name of  
Spouse: \_\_\_\_\_

First  
Boy/Girlfriend: \_\_\_\_\_

How did you  
meet your  
wife/husband: \_\_\_\_\_

Notes: \_\_\_\_\_

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**FAMILY**

Children  
include step &  
adopted (if  
applicable)  
Names & Ages:

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Child 1 DOB,  
Location:

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Child 2 DOB,  
Location:

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Child 3 DOB,  
Location:

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Child 4 DOB,  
Location:

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Child 5 DOB,  
Location:

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Child 6 DOB,  
Location:

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Notes:

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Grandchildren  
and great  
Grandchildren  
Names & DOB:

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Notes about  
any of the  
above:

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Parents:

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Mother (name,  
DOB, place of  
birth,  
deceased or  
not) Her best  
qualities or  
memories:

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Father (name,  
DOB, place of  
birth,  
deceased or  
not) His best  
qualities or  
memories:

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Notes:

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Grand Parents:

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Grand Mother  
(name, DOB,  
place of birth,  
deceased or  
not) Her best  
qualities or  
memories:

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Grand Father  
(name, DOB,  
place of birth,  
deceased or  
not) His best  
qualities or  
memories:

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Notes:

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Siblings 1  
(name, DOB,  
place of birth,  
deceased or  
not):

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Siblings 2  
(name, DOB,  
place of birth,  
deceased or  
not):

Siblings 3  
(name, DOB,  
place of birth,  
deceased or  
not):

Siblings 4  
(name, DOB,  
place of birth,  
deceased or  
not):

Siblings 5  
(name, DOB,  
place of birth,  
deceased or  
not):

Notes:

Extended  
Family – Aunts,  
Uncles &  
Cousins (name,  
DOB, place of  
birth,  
deceased or  
not):

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**Friends**

Names &  
length of  
friendships:

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**Message you  
would like to  
give to your  
loved ones:**

Eg "To .... I just want you to know ow much I Love you and..."

"My hope for you ... is to..."

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**Employment/**

**Business –**

First Job, Over  
the years what  
employment or  
business did  
you run:

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**Your  
personality**

If you could  
sum up your  
personality in  
3 words, what  
would they  
be?:

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**Education –**  
what schools  
did you attend  
and when did  
you finish:

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Favourite  
Teacher, Best  
part of school  
Favourite  
memory of  
school, were  
you ever  
punished:

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**Interests & Hobbies –**

sport,  
volunteering,  
science:

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**Travel – places**  
you have been:

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Favourite  
Music/Song:

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Favourite  
Food:

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Favourite  
Movie/s:

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- What do you want to be remembered for?



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Address: \_\_\_\_\_

Email: \_\_\_\_\_

**Recipient:**

Name: \_\_\_\_Jessica Hayhurst (Jesses Photography )\_\_\_\_\_

Address: \_\_\_\_91 Fifth Street Port Pirie West\_\_\_\_\_

Email: \_\_\_\_jessesphotography@hotmail.com\_\_\_\_\_

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