Name:			

Obituary Worksheet

Done (X)	Obituary Element	Facts
	Full Name	
	Date of Birth	
	Date of Death	
	Parents Name	
	Location of Birth	
	Step-Parents' Names	
	Names of Siblings and their Spouses	
	Places Lived	
	Schools Attended	
	Degrees Obtained	
	Significant Life Events as a child	
	Significant Life Events as teen	
	Significant Life Events as an Adult	
	First Marriage and events	
	Second Marriage and events	
	Children	

Obituary Worksheet (Continued)

_		(Continueu)
Done	Obituary	
(X)	Element	Facts
	Grandchildren	
	Grandennaren	
	Other Relatives	
	Work Experience	
	WOIR Experience	
	TT 11'	
	Hobbies	
	Places Traveled	
	Best Friends	
	Special Events	
	Special Events	
	Classach	
	Church	
	Affiliation(s)	
	D C ' 1	
	Professional	
	Associations	
	Favorite Poem or	
	Saying	
	Saying	
	Funeral or	
	Memorial	
	Information	
	Burial Information	
	Duriai iliforniation	
	Contributions in	
	lieu of flowers	
	Care of Pets	
	Funny Stories	
	Funny Stories	
	l	