Background Information

Participant's Name	DOB//
Living Locations:	
Place of Birth	
Raised	
Other places lived	
Lives now	
Family: Parents names	
Brothers and Sisters	
Spouse and children	
Spouse and childrenAny other friend or relative significant to them	
Religious Preference:	
Tronglous I Telefence.	
Highest Education Achievement:	
Military Services yesno Branch	
Work History:	
OccupationVolunteer/ com	nmunity services
General Information:	
Which would best describe their conversational style: talkative	quite moderate
In conversation do they imitate respond only complete thoughts loses topics	(say yes or no) fail to express
Describe their eating habits: (i.e. feeds self, problem wo food usually eaten)	
Describe their mobility: (i.e. walks alone, uses cane, wawanders, redirects easily or with difficulty)	alker, physical assistance needed,

Check all that apply to their behavior: Sense of humor Agitates easily____ Flirtatious ____ Quarrelsome____ Affectionate____ Paces ____ Depressed Wanders Sometimes sits with head down Sees/hears things that are not there Reliable with what he/she says____ Cooperative____ Disruptive____ Verbally aggressive____ Withdrawn____ Physically aggressive____ Suspicious____ Additional comments: We would like to know their favorite in the following areas: Foods Colors Music Hobbies Reading Materials Crafts_____ T.V. programs_____ Movies Sports_____ Fitness/exercise_____ Do they like: Word games _____ crossword puzzles _____ card games _____ Dominoes____

Do they enjoy gardening?

What size group are they most comfortable in: small medium___ large____