

# Family History Questions and Topics for Interview



What is your family name? \_\_\_\_\_

What does your family name mean? \_\_\_\_\_

Name of Self: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Name of Mother: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Mother's Father: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Mother's Mother: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Father: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Father's Father: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Father's Mother: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Given Indian Name: \_\_\_\_\_

Tribe(s) enrolled in/affiliated with: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Places lived (city, state, and country if outside the US): \_\_\_\_\_

Still living: ☐ Yes ☐ No Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

Additional Information from Interview:

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