Genogram

Great

Grandparents -------

Grandparents ---------

Parents --------------------------------------------

You & Siblings ------------------------------------------

 female

 please start with you as male or female. Siblings if older than you go to the left of the screen. Younger to the right.

 male

Print out a copy. Use a pen to put in information.

Guidelines for General Information

After completion of this form please send me a copy. !!!!!!!!!!

The following is a list of several important factors, so please include as much information as you can!

|  |  |
| --- | --- |
| **Name** | The name of the person. |
| **Date of birth** | The date the person was born. |
| **Date of death** | The date the person died. |
| **Medical conditions** | Any known medical conditions for the person. Please list every condition you can, including mental or behavioral conditions such as alcoholism, Lyme, Alzheimer’s, cancer, diabetes, etc… |
| **Stillbirths** | If this person experienced one or more stillbirths, please list the dates if possible. |
| **Abortions** | If this person experienced one or more abortions, please list the dates if possible. |
| **Miscarriages** | If this person experienced one or more miscarriages, please list the dates if possible. |
| **Early childhood deaths** | If this person died at an early age, please list the date and age. |
| **Occupations** | All occupational positions that this person has held. |
| **Immigration information** | If this person was an immigrant, please give the date of immigration (or a timespan) as well as the country of origin and location of arrival. |
| **Accidents** | If this person was in any non-minor accidents, please list the date and nature of the accident here. Include any relevant details as you see fit. |
| **Adoptions** | If this person adopted any children, please list the names and dates of the persons adopted. |
| **Birth order** | The order in which this person was born amongst their siblings. For example, if they were the second child of their parents, then you would put “Second born” |
| **Twin/Triplet** | If this person was a twin or triplet, please specify this as well as if any of the other twins/triplets are deceased. |
| **Foster parents** | If this person had any foster parents, please list their names and relationship here. |
| **Extra information** | Be sure to add any details you think might be helpful. Be creative, you never know when an unusual nuance could be of major significance! |

Don’t worry if you can’t remember some things, or if you don’t have access to the information; just put down as much as you can!