

FAMILY RESEARCH
INDIVIDUAL FACT SHEET

About the individual

Family name

Given name

Middle names(s)

Date of birth

DD MM YYYY

Place of birth
(Full address if known)

Please attach a birth certificate if available. A full birth certificate is preferred.

Only complete the Baptism details if the individual was known to have been Baptised

Date of Baptism

DD MM YYYY

Place of Baptism
(Full address if known)

Please attach a Baptism certificate if available..

Does the information below relate to an adopted child? If so, please complete two forms, one for the biological parents and one for the adopting parents

Yes	No
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About the individual's parents

Mother's family name

Mother's given name

Mother's middle name(s)

Mother's maiden name

Please complete a separate form for the mother.

The details of the father relate to the biological father, not necessarily the husband of the mother, unless this form is for an adopted child. If the father is not known, please state Unknown.

Father's family name

FAMILY RESEARCH
INDIVIDUAL FACT SHEET

Father's given name

Fatherer's middle name(s)

Please complete a separate form for the father above, if known

About the individual's siblings

Number of siblings (if none, enter 0)

Brothers

Sisters

Please complete a separate form for each of the above siblings.

About the individual's adult relationships and the individual's children

If with a partner, please complete the following section for each partner. If unmarried, please state nature of relationship (e.g. co-habited) in the Place of marriage box and the date the relationship commenced. For a female with children for whom the father is not known (i.e. was never declared by the female), please treat the Partner as Unknown.

Partner 1

Partner's family name when married

Partner's given name

Partner's middle name(s)

Partner's family name at birth

Please complete a separate form for Partner 1

Date of marriage

DD

MM

YYYY

Place of marriage
(Full address if known)

Please attach a copy of the marriage certificate if available

Number of children from this marriage. Enter 0 if none

Girls

Boys

Please complete a separate form for each child

Partner 2

Is this applicable?

Yes

No

FAMILY RESEARCH

INDIVIDUAL FACT SHEET

Partner's family name when married

Partner's given name

Partner's middle name(s)

Partner's family name at birth

Please complete a separate form for Partner 2

Date of marriage DD MM YYYY

Place of marriage (Full address if known)

Please attach a copy of the marriage certificate if available

Number of children from this marriage. Enter 0 if none Girls Boys

Please complete a separate form for each child

What happened to Partner 1?

Date of above event DD MM YYYY

Place of above event (Full address if known)

Partner 3 Is this applicable?

Yes	No
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Partner's family name when married

Partner's given name

Partner's middle name(s)

Partner's family name at birth

Please complete a separate form for Partner 3

Date of marriage DD MM YYYY

FAMILY RESEARCH
INDIVIDUAL FACT SHEET

Place of marriage
(Full address if known)

Please attach a copy of the marriage certificate if available

Number of children from this marriage. Enter 0 if none

Girls

Boys

Please complete a separate form for each child

What happened to Partner 2?

Date of above event

DD MM YYYY

Place of above event
(Full address if known)

If there are more than three Partners, please continue in the same way on separate sheets

About the individual's death and burial or cremation

If the person is deceased, please complete the following section

Date of death

DD MM YYYY

Place of death
(Full address if known)

Please attach a copy of the death certificate if available

Was this a burial, cremation or other (please state)

Date of above event

DD MM YYYY

Place of above event
(Full address if known)

Please attach a copy of any relevant papers if available

Please state any other relevant details, with dates and places, such as war record, forces enlistment and/or discharge, occupation(s), etc. in the box below and supply any supporting evidence, if available. Continue on a separate sheet if necessary.