

# Family Member Interview Sheet

Name \_\_\_\_\_

**Directions:** Ask as many family members as possible about their health history. If a family member is not available or has passed away, ask another family member about them. If there is no information, leave those questions blank. If a family member is too young to answer the questions, ask someone to help you.

## Start with you....

1. Do you have any health-related conditions? If so, what are they? \_\_\_\_\_  
\_\_\_\_\_

## Questions for your Mother

1. How old are you? \_\_\_\_\_
2. Do you have any health conditions? \_\_\_\_\_
3. How does this affect your life? \_\_\_\_\_  
\_\_\_\_\_

## Questions for your Father

4. How old are you? \_\_\_\_\_
5. Do you have any health conditions? \_\_\_\_\_
6. How does this affect your life? \_\_\_\_\_  
\_\_\_\_\_

## Questions for your Brother or Sister, Half-Sister or Half-Brother (circle one)

7. How old are you? \_\_\_\_\_
8. Do you have any health conditions? \_\_\_\_\_
9. How does this affect your life? \_\_\_\_\_  
\_\_\_\_\_

**Questions for your Brother or Sister, Half-Sister or Half-Brother (circle one)**

10. How old are you? \_\_\_\_\_
11. Do you have any health conditions? \_\_\_\_\_
12. How does this affect your life? \_\_\_\_\_
- \_\_\_\_\_

**Questions for your Brother or Sister, Half-Sister or Half-Brother (circle one)**

13. How old are you? \_\_\_\_\_
14. Do you have any health conditions? \_\_\_\_\_
15. How does this affect your life? \_\_\_\_\_
- \_\_\_\_\_

\*If you have more brothers, sisters, half-sisters or half-brothers, add their information under the "other" section.

**Questions for your Grandmother (your mom's mother)**

16. How old are you? \_\_\_\_\_
17. Do you have any health conditions? \_\_\_\_\_
18. How does this affect your life? \_\_\_\_\_
- \_\_\_\_\_

**Questions for your Grandfather (your mom's father)**

19. How old are you? \_\_\_\_\_
20. Do you have any health conditions? \_\_\_\_\_
21. How does this affect your life? \_\_\_\_\_
- \_\_\_\_\_

**Questions for your Grandmother (your dad's mother)**

22. How old are you? \_\_\_\_\_
23. Do you have any health conditions? \_\_\_\_\_
24. How does this affect your life? \_\_\_\_\_
- \_\_\_\_\_

**Questions for your Grandfather (your dad's father)**

- 25. How old are you? \_\_\_\_\_
  - 26. Do you have any health conditions? \_\_\_\_\_
  - 27. How does this affect your life? \_\_\_\_\_
- 

**OTHER:**

**Questions for my** \_\_\_\_\_

- 28. How old are you? \_\_\_\_\_
  - 29. Do you have any health conditions? \_\_\_\_\_
  - 30. How does this affect your life? \_\_\_\_\_
- 

**Questions for my** \_\_\_\_\_

- 31. How old are you? \_\_\_\_\_
  - 32. Do you have any health conditions? \_\_\_\_\_
  - 33. How does this affect your life? \_\_\_\_\_
- 

**Questions for my** \_\_\_\_\_

- 34. How old are you? \_\_\_\_\_
  - 35. Do you have any health conditions? \_\_\_\_\_
  - 36. How does this affect your life? \_\_\_\_\_
-