## PARENTAL RESPONSIBILITIES EVALUATION

## PERSONAL HISTORY QUESTIONNAIRE

			Do	OB	Date	
	Section I: Gene	ral Information				
	How old were your p	parents when you w	ere born?	Mother	Father	
	If you were adopted,	what was your age	at time of a	doption?		
	Describe your relationship with each of your brothers and sisters; e.g., close, distant, friendly, combative, etc.					
	Sibling's Name	Current Ag	e/Sex	<u>Natur</u> <u>Then</u>	e of Relationship <u>Now</u>	
,	(If you have	more siblings, plea	se continue	at end of ques	stionnaire.)	
]					·	
				e(s) during yo	•	
	List the places you liv	ed up until age 18  Your Age	and your age Who Live	e(s) during yo	ur stay in each of thes  Type of Dwelling	
	List the places you liv	ed up until age 18  Your Age	and your age	e(s) during yo	ur stay in each of thes  Type of Dwelling	

## Section II: Social and Cultural Influences

1.	Describe any strong ethnic sub-cultural or religious influences in your early development.
2.	How strong an influence was religion in your family's life?
3.	For what, how, and by whom were you praised or criticized as a child? How frequently?
4.	Was anyone in your family (including yourself) ever in trouble with the law while you were growing up? If yes, explain.
5.	Briefly describe your childhood relationship with each of your parents. Could you confide in them? Could you count on their help and support if you needed it?
6.	What do you know about your parents' relationship with their parents?
7.	What activities did you like as a child?
8.	What were you afraid of as a child?
9.	Describe your school experience and your feelings about school.
10.	When did you first begin dating? How frequently?
11.	Describe your work while you were growing up. List types of work you did and at what age.

## Section III: Health Data

1.	As a child, did you have any serious injuries?
	Any prolonged illness?
	Any physical disabilities?
	Take any medication for an extended period of time?
2.	Were you ever abused, sexually or otherwise, as a child? If yes, explain.
3.	What were your parents' attitudes towards sex?
4.	Did anyone in your home abuse alcohol or other drugs? If yes, explain.
5.	Was anyone in your family ever in treatment for alcohol or drug abuse? If yes, what was the outcome?
6.	Was anyone in your family ever diagnosed mentally ill? If yes, what was the diagnosis, treatment, and outcome of treatment?
7.	Describe your general emotional state as a child:
	As an adolescent:
8.	Is there anything not covered above that you feel is important to mention?

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