

The Episcopal Church of St. Paul & St. James, 57 Olive St., New Haven, CT 06511 203-562-2143

Personal Data & Information Regarding End-of-Life Planning. Whatever information you choose to share will be kept confidential on file at church.

Your Name _____ Date of Completion _____

6. Biographical Data for Death Certificate & Writing an Obituary.

Your Birthplace City _____ State _____ Country _____

Your Date of Birth _____

Your Parents

Your Father's Full Name _____

Deceased? _____ Birth date _____ Birthplace _____

Occupation _____

Your Mother's Full Name _____

Deceased? _____ Birth date _____ Birthplace _____

Occupation _____

Your Present Marital Status (circle)

Single Married Partnered Widowed Separated Divorced

Marriage Date _____ Divorce Date _____

Name of Spouse _____

Birth Date _____ Place of Birth _____ Date of Death _____

Spouse/Partner Occupation _____

Names of Children & Cities of Residence

Brothers & Sisters & Cities of Residence

Number of **Grandchildren**_____Number of **Great-Grandchildren**_____

Schools you Attended and Degrees

Your Present Occupation

Name of firm_____

Address_____

Present Position_____Dates Employed_____

Previous Occupations

Military Record (important in the case of possible veterans' benefits and/or burial)

Date Enlisted_____Rank_____

Branch of Service_____”C” Number_____

Date Discharged_____Service No._____

Veterans' Organizations_____

Association Affiliations, Labor Unions, Political Offices Held, Club Memberships
