

Interviewee Information Form

NAME:

PROJECT:

DATE OF BIRTH:

HOURS RECORDED:

PLACE OF BIRTH:

**DATE
RECORDED:**

**ETHNICITY:
IWI/HAPU:**

**MARAE:
VILLAGE:**

FATHER'S NAME:

FATHER'S DOB/DOD:

FATHER'S OCCUPATION:

MOTHER'S MAIDEN NAME:

MOTHER'S DOB/DOD:

MOTHER'S OCCUPATION:

SISTERS (DOB/DOD):

BROTHERS (DOB/DOD):

EDUCATION:

COMMUNITY WORK

EMPLOYMENT:

POLITICS:

RELIGION:

LIVED AT:

*SPOUSE/PARTNER
NAME/DOB:*

*SPOUSE/PARTNER
OCCUPATION:*

DATE OF MARRIAGE:

CHILDREN (DOB):

ADDITIONAL MATERIAL:

HEALTH:

TECHNICAL REPORT:

EQUIPMENT USED:

SUMMARY:

INTERVIEWER:

ABTRACTER: