

Oral History and Folklife Research, Inc.

PRE-INTERVIEW SURVEY

Thank you for taking the time to complete this extensive survey. Please answer as many of the following questions as you feel comfortable completing. Feel free to add any additional information that you think will help the interviewer prepare for your interview on a separate sheet.

Name:	
Current Address:	
Telephone Number(s):	
Cell Phone:	
Email Address:	
Date of Birth:	Place of Birth:
FAMILY HISTORY	
Father's Name:	
Place/Year of Birth:	
Place/Year of Death:	
Education (check highest le college graduat	vel of education):noneelementaryhigh school e school. If your father attended college, please list name of school and date
of graduation:	3 71
Father's Occupational Histo	ry:
Father's Religious Affiliation	n:
Father's Political Affiliation	
Father's Military Service:	
Mother's Name:	
Place/Date of Birth:	
Place/Date of Death:	
Ethnicity:	
Education (check highest le	vel of education):noneelementaryhigh school
college graduat	e school. If your mother attended college, please list name of the school and
date of graduation:	
Mother's Occupational Hist	ory:
Mother's Religious Affiliati	on:
Mother's Political Affiliatio	n:

Mother's Military Service:
Date and Place of Parents' Marriage: Please list the names of your siblings, dates of birth and highest level of education attained. (Please list name of school and date of graduation, if possible.)
Did other close relatives serve in the military? If so, please give details:
YOUR EDUCATION
Elementary School – name(s), location(s), and years of attendance:
High School and/or Technical/Professional School – name(s), location(s), and years of attendance:
Undergraduate – name(s), location(s), and years of attendance:
Major(s): Scholarships Held: Greek Organization:
Greek Organization:
Athletic Teams:
Were you a member of the ROTC or other military training course?
Were you a member of the ROTC or other military training course? If so, for how many years? Did you receive a commission? Graduate School(s) – name(s), location(s), and years of attendance:
If you are a veteran, did you use the GI Bill for any part of your education? Please explain.
FOR THOSE WHO SERVED IN THE MILITARY
Date and Place of Induction:
Age: Branch of Service:
Where did you complete basic training? Where did you complete advanced training?
Did you enter an officer's training program? When and where did you complete your training?
Did you apply for any specialized branches of the service or training opportunities (i.e. the airborne, radio school, etc.)? If accepted, please list and give dates:
What was your primary job(s) in the military (i.e., infantryman, pilot, clerk, etc.)?
Please list the units you served with while on active duty, places you served and approximate dates of service. If you were a career military officer/enlisted person, you may wish to include a résumé:

Did you ever take part in any combat action? If so, where and when?
Were you wounded? If so, where were you held and for how long? If so, where were you held and for how long?
Please list any awards and decorations received:
Did you participate in occupation duty? If so, where and for how long?
Date and rank at the time of your separation from active duty and your final discharge (if different):
Did you join the National Guard or the Reserves? For how long?
Unit(s): Were you ever recalled to active duty? If so, when, for how long and with what unit(s)?
Please list any national or unit veterans' association(s) to which you have belonged:
Did you make use of any GI Bill/Veterans benefits? Please list:
FOR CIVILIANS WHO SERVED ON THE HOME FRONT DURING TIMES OF WAR
Where did you live during the war years? Where you employed in any war-related industries? Where (company and location)?
What was your specific job(s) (i.e., welder, researcher, clerk, etc.)? Did you or your family participate in a civil defense unit? Please give details:
Were you active in any volunteer organizations during the war? Please list the name(s) and activities:
Were you unable to enlist in the military? Why?
Your Career & Life Experiences
Occupational History (Please list by date, in reverse chronological order, including positions held):
Were/are you involved in any civic or volunteer activities? Please explain:
Did you ever run for and/or hold political office? Please explain:
Were/are you involved in any social, cultural and/or political movements? Please explain:

YOUR FAMILY (IF APPLICABLE)

Spouse's Name:
Spouse's Place/Date of Birth:
Spouse's Education (check highest level of education):noneelementaryhigh school
collegegraduate school. If your spouse attended college, please list name of school and date
of graduation:
of graduation: Spouse's Occupational History (Please list by date, in reverse chronological order, including positions held):
Date/Place of Marriage: Number of children Please give names of your children, date of birth, level of education attained. Please also include name of school(s) and date of degree(s) if possible:
Number of children Please give names of your children, date of birth, level of education attained.
Please also include name of school(s) and date of degree(s), if possible:
Did your spouse or any of your children serve in the military? Please list dates, service branch, where stationed, etc.:
EXPERIENCES TO INCLUDE IN THE INTERVIEW

Please mail the completed pre-interview survey to:

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