

Group _____

Date _____

Name _____

(First, Middle, Last)

Who Am I? Who Are We? PROJECT

Personal Information & History

Directions: Fill out this form as completely as possible. We'll be using this information to create our upcoming project.



Age:

Birthplace (Hospital/Clinic/Home, City, State, Country):

Birthdate (Date and time):

Origin of family (ex. Spain & Israel):

Current Home Address:

Other cities where you've lived:

Places you've travelled:

Firsts (ex. rode a bike, lost a tooth, spent the night away from home, etc.)

Important Events (ex. Justin Bieber concert, bar mitzvah, Brownies awards ceremony, etc.):

