



South West Aboriginal  
Land and Sea Council  
Aboriginal Corporation

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# Client Family History Form

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The information you provide on this form will assist researchers in preparing genealogies. The information is confidential.

1. Please complete the form to the best of your knowledge. If you do not know some of the information, write 'Unknown' in the space provided.
2. You can also make an appointment with a researcher from the Land Council if you need help completing the form or if you wish to discuss any of the information you supply.
3. To arrange an appointment, please contact the Research Unit, South West Aboriginal Land & Sea Council on 9358 7400 or toll free for country callers on 1800 617 617.
4. Before submitting the form, **you must sign the declaration in Section D.**
5. Please forward your completed form to the Research Unit, South West Aboriginal Land & Sea Council, PO Box 6383, EAST PERTH WA, 6892.
6. Upon completion of the Research Unit entering your data, you will receive an ancestor genealogical chart.

## CONFIDENTIAL

SWALSC treats the information you provide in this form as confidential and will not provide it to any third party without your express consent in writing.

## SECTION A: YOUR DETAILS

First name:	Middle name/s:	Surname:
Noongar name (if applicable):		Nickname/s or other name/s (if applicable):
Residential address (street and suburb):		
Email:		Phone:
Date of birth:		Place of birth:
Traditional Country:		Totem (if applicable):
Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> De facto		

**Spouse/partner's** full name:

**Spouse/partner's** date of birth:

**Spouse/partner's** place of birth:

Date & place of marriage:

**Spouse/partner's mother:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

**Spouse/partner's father:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

If previously married or in a de facto relationship, former **spouse/partner's** name:

Additional information:

**Your children:**

..... Date of birth: ..... Place of birth: .....

..... Date of birth: ..... Place of birth: .....

..... Date of birth: ..... Place of birth: .....

..... Date of birth: ..... Place of birth: .....

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..... Date of birth: ..... Place of birth: .....

Please write in the space below if children are from a previous relationship and indicate other parent. If any children are deceased please write in the space below the date & place of death (if known).

Additional information:

**Your brothers and sisters:**

..... Date of birth: ..... Place of birth: .....

..... Date of birth: ..... Place of birth: .....

..... Date of birth: ..... Place of birth: .....

..... Date of birth: ..... Place of birth: .....

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Please write in the space below if siblings are from a different relationship and indicate other parent. If any siblings are deceased please write in the space below the date & place of death (if known).

Additional information:

## SECTION B: YOUR MOTHER'S FAMILY

<b>Mother's</b> full name:	
Place of birth:	Date of birth:
Noongar name (if applicable):	Nickname/s / other name/s (if applicable):
If deceased, please indicate date & place of death:	

<b>Mother's mother's</b> full name:	
<b>Mother's mother's</b> date & place of birth (if known):	<b>Mother's mother's</b> date & place of death (if known):
<b>Mother's father's</b> full name:	
<b>Mother's father's</b> date & place of birth (if known):	<b>Mother's father's</b> date & place of death (if known):

Details of your **great-grandparents** on your mother's side:

**Mother's mother's mother:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

**Mother's mother's father:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

**Mother's father's mother:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

**Mother's father's father:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

## SECTION C: YOUR FATHER'S FAMILY

<b>Father's</b> full name:	
Date of birth:	Place of birth:
Noongar name (if applicable):	Nickname/s / other name/s (if applicable):
If deceased, please indicate date & place of death:	

<b>Father's mother's</b> full name:	
<b>Father's mother's</b> date & place of birth (if known):	<b>Father's mother's</b> date & place of death (if known):
<b>Father's father's</b> full name:	
<b>Father's father's</b> date & place of birth (if known):	<b>Father's father's</b> date & place of death (if known):

Details of your **great-grandparents** on your father's side:

**Father's mother's mother:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

**Father's mother's father:** .....

Date & place of birth (if known): .....

Date & place of death (if known): .....

**Father's father's mother:** .....

Date & place of birth (if known): .....

Date & place of death if known: .....

**Father's father's father:** .....

Date & place of birth if known: .....

Date & place of death (if known): .....

## SECTION D: DECLARATION

I declare that the above information is true and correct to the best of my knowledge:

Signed: ..... Date: .....