

FAMILY QUESTIONNAIRE

Complete only if you have a family connection to the Holocaust and/or Israel!

Community (City/State): _____

Last Name: First Name:

Do you have any family members who were from Poland? O No O Yes, complete below:

What city were they from?

How are they related to you?

When did they leave Poland?

Do you have any family members who died in a concentration camp?	🔿 No	O Yes, complete below:
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How were they related to you?

In which camp did they perish?

Do you have family who were liberated from a concentration camp? O No O Yes, complete below:

Which camp were they liberated from?

Which other camps were they in (if any)?

How are they related to you?

Are these relatives still alive?

Have you had the opportunity to speak with them about their experiences? \bigcirc No \bigcirc Yes, complete below:

		NAME:
Do you have any family members living in Israel?	O No	O Yes, complete below
What are their names?		
How are they related to you?		

Where do they live?

Do you have any family members who died in Israel as a result of terrorism or war? ONO OYes, complete below: What were their names?

How were they related to you?

Where are they buried?