#  Health, Social, Educational, and Genetic History Additional Page

**Purpose:** Use this form when there is not enough space in Form 2649 Health, Social, Educational, and Genetic History to provide a child’s full family and genetic history.

**Directions:** Refer to the directions in Form 2649 Health, Social, Educational, and Genetic History.

| INFORMATION ABOUT THE CHILD’S FAMILY AND GENETIC HISTORY   |
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| **OTHER RELATIVE** |
| Name:       | Relationship to child:       |
| Sex:       | Nationality:       |
| Date of birth: (MM/YY)       | Place of birth:       |
| Citizenship status:       | Religion:       |
| Education level:       | Occupation and last employer:       |
| Date of death, if applicable:       | Age and cause of death, if applicable:       |
| Relationship history with child:       |
| Eye color:       | Height:       |
| Hair color:       | Weight:       |
| Observable characteristics such as right- or left-handedness, attached or unattached ear lobes, freckles, dimples, and hair pattern:       |
| Additional information that could be helpful to the child in the future, if any:      |
| Ethnicity and description of ethnic background:      |
| Religious background:       |
| Personality description, special interests, and talents:       |
| Additional work, professional achievement, or educational information:      |
| Military service:       |
| Prior marriages and divorces:       |
| Any information necessary to determine whether the child is entitled to, or otherwise eligible for, state or federal financial, medical, or other assistance:       |
| Current health status:       |
| Medical history:       |
| Genetic history, disorders, or diseases:       |
| Developmental history:       |
| Dates, results, and summary of any psychiatric and psychological evaluations:       |
| Dates, results, and summary of any social evaluations:       |
| Intellectual development:       |
| History of childhood or other traumatic experiences, including exposure to abuse or neglect:       |