THE FORENSIC HISTORY QUESTIONNAIRE 12

LIFE HISTORY PART 1: BASIC BACKGROUND INFORMATION

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The Forensic History Questionnaire (FHQ) is part of your forensic evaluation. It is not a test. It is a written interview which asks you to provide basic information about each of the major realms of your life. The FHQ asks basic information about people (parents, partners, family, and children), places (residences), tasks (education and employment), activities (recreation, leisure time activities, charitable and non-profit contributions), legal history (administrative, civil, and criminal matters), treatment and health issues (physical and mental health and substance use), and significant life events.

Answer the FHQ questions in a quiet, comfortable location and at your own speed. There is no need to complete the form all in one sitting. Make a photocopy of the completed questionnaire for yourself and, if you wish, for your attorney. Return the original questionnaire to the examiner and then call the office to schedule your interviews. Your providing the completed questionnaire before the first interview will allow the examiner to know a lot more about you from your perspective; your interviews will probably take less time; and your examination is likely to be more thorough. Keep in mind that some of what you write may be used as part of and as a basis for the examiner's opinions, report, and testimony.

Please respond to each of the questions. For the purposes of the FHQ questions, consider "childhood" as birth through 17 years. If none of the choices is correct for you, simply write "None" on the item. If any question does not apply to you, write "Not Applicable" or "NA" on the item. The "(\$\scrt{\scrt}\$)" symbol is a reminder for you to place a check mark (\$\scrt}\$) next to each part of that item that is true for you. "Mo/Year" asks for approximate month and year. Answer each of the questions as best you can. If you cannot remember some of the information that is requested, feel free to look it up and to ask others. Of necessity, some of the information is personal. You may decline to answer any items that you wish but please try to answer as many as you can. Do not provide information that might be self-incriminating—simply write that you decline to answer that question.

Please type or write legibly in pen (not pencil) so that your responses may be photocopied later. Do not have someone else type or transcribe your answers for you. Printing your answers is fine. Feel free to write any comments and additional information that you might wish directly on the FHQ pages but do not attach extra pages and do not attempt to recreate or modify the form on a word processing program. If there is not enough space for you to write a full answer to any question, write the most important information in the space provided and submit any additional documentation directly to the examiner. You will have a chance to discuss the questions further with the examiner during your interviews. If you have been given additional parts of the FHQ to complete, the same instructions apply to each part.

The forensic examiner's job is to perform an independent, thorough, and objective evaluation and to assess rival hypotheses both from the perspective of the moving party and that of the responding party. The information that you provide in this questionnaire will be very helpful to your assessment process and your cooperation is very much appreciated.

Person 4	YOUR IDENTIFICATION	4. Please briefly identify the legal, administrative, personnel or other forensic matter in which you are
I.	Name	involved and the attorney, if any, who is representing you:
2.	Date of birth; age	y out.
3.	The date you began this questionnaire was //_	
E 2	000 Stuart A Greenberg, all rights reserved Page	1 of 12 Copyrighted purchal eproduction of blank forms without permission is prohibited

II. FAMILY AND RELATIONSHIPS

1. List the approximate birth date, age, and name of each of your sisters, brothers, parents, grandparents, uncles, and aunts. If deceased, indicate in what year and at what age each person died. Include biological, half, step, adoptive, and foster family members. Also include parent-figures, surrogate parents, and others, who although they weren't actually related to you, participated with your family as if they were family members.

Do not include daughters, sons, romantic partners, and spouses—they will be asked about in later questions. Indicate if each person was one of the three very most significant positive influences in your life and then indicate if you believe if each person mistreated you or was otherwise a significant negative influence at a time in your life.

birth mo/year	current age (or age when deceased)	name of each sister, brother, parent, grandparent, aunt, and uncle	nature of relationship (e.g., paternal grandmother, "adopted" uncle, biological mother, foster brother)	was this person one of the three very most significant positive influences in your life?
1	yrs.			Y/N
	yrs.			Y/N
/	yrs.			Y/N
	yrs.			Y / N
	yrs.			Y/N
/	yrs.	The state of the s		Y / N
	yrs.	-		Y/N
/	yrs.			Y/N
/	yrs.			Y/N
/	yrs.			Y/N
	yrs.			Y/N
. /	yrs.			Y/N
			The second secon	Y/N
	yrs.			Y/N

2. If any of the above persons neglected, mistreated, or abused you in any way that you consider to have been significant, please indicate the person's name:

3. List the first names and approximate ages the persons whom you consider to have been your most significant romantic relationship partners.

relationship began mo/year	your age at the start of romance	partner's age at the start of romance	first names of romantic partners	relationship ended mo/year	if cohabitated, mo/year of living together	if married, mo/year of marriage	if separated, mo/year of no longer residing together	if divorced, mo/year of divorce
/	yrs.	yrs.		1		/_	/	/
	yrs.	yrs.			//			
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/	yrs.	yrs.				/		1

4. List the name and approximate age of each of your daughters and sons. If deceased, indicate at what age and in what year each died. Include biological children, adopted children, stepchildren, foster children, and other children who, although they weren't actually related to you, participated with you as if they were your children.

birth mo/year	current age	name of each daughter and son	nature of relationship (daughter, stepson, etc.)	name of biological mother	name of biological father
	yrs.				
/	yrs.				
	yrs.				
/	yrs.				
	yrs.	**************************************			
/	yrs.	A A A A A A A A A A A A A A A A A A A			
/	yrs.		and support, in		
	yrs.				
	yrs.				

5. List the names and approximate ages of three persons other than family members and romantic partners who have been most significant and important to you in your life. Consider persons who had a special meaning in your life such as best friends, teachers, coaches, friends of your parents, parents of your friends, doctors, pastors, students, co-workers, etc.

relationship began mo/year	relationship ended mo/year	your age at the start of relationship	person's age at the start of relationship	other person's name	the nature of their relationship to you (e.g., coach, boss, neighbor, best friend, not family members nor romantic partners)
/	1	yrs.	yrs.		
/		yrs.	yrs.		
/	/	yrs.	yrs.		

6. Considering all of the persons whom you mentioned in the previous two pages, the following of them has had a significant problem with anger or violence, misusing substances, misusing alcohol, mental illness, or illegal behavior:

IV. RESIDENTIAL HISTORY

1. As best you can remember, list below where you were born and each different city where you resided as a child and as an adult except brief vacations. Also indicate if you resided for any amount of time at a treatment center, hospital, jail, detention center, foster care, college, university, or boarding, training, religious, military, or technical school.

started living there mo/year	stopped living there mo/year	city, state	type of residence (e.g., house, apartment, school)	name of each person who lived in the residence with you (do not include visitors who stayed less than two weeks)
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V. EDUCATIONAL HISTORY

1. As best you can remember, list where you attended for each grade of primary school, elementary school, middle school, junior high school, and high school. Note any period during which you were home schooled or tutored. Circle "Y" (yes) or "N" (no) if you were promoted or graduated, if you received any form of special education, and if you ever dropped out or were ever suspended or expelled from any grade or school.

began attending mo/year	stopped attending mo/year	grade(s) attended	city & state of school	type of school (e.g., elementary, high school)	did you get promoted or graduate?	any type of "special education"?	dropped out, suspended or expelled?
1	/	Name of the state			Y/N	Y/N	Y/N
/		To the same of the			Y/N	Y/N	Y/N
/	1	The state of the s			Y/N	Y/N	Y/N
/	/				Y/N	Y/N	Y/N
1	/				Y/N	Y/N	Y/N
/	/				Y/N	Y/N	Y/N
1	/	The state of the s	A A Service of the Control of the Day of the Control of the Contro		Y/N	Y/N	Y/N
1	/				Y/N	Y/N	Y/N
/					Y/N	Y/N	Y/N
	/		And a second		Y/N	Y/N	Y/N
1	7				Y/N	Y/N	Y/N
	/				Y/N	Y/N	Y/N
1	/				Y/N	Y/N	Y/N

2. List each of the schools or courses of study that you have attended since high school. Indicate the program or major area in which you concentrated, the degree(s) or certification(s) you earned, the last year or grade you attended, and if you ever dropped out or were ever suspended or expelled.

began attending mo/year	stopped attending mo/year	name of school	major area or program	certification or degree earned	last grade attended (e.g., sophomore)	dropped out, suspended, or expelled?
1	/					Y/N
/	/					Y/N
/	1					Y/N
/	7					Y/N
/	1			acceptations of the second		Y/N
/	/					Y/N

3. List your most significant childhood and adult experiences in spiritual, philosophical, ethical, or religious training. Feel free to not identify a particular religion if you prefer. Provide full-time religious education in the questions above.

approximate mo/year	nature of participation	
/		

VI. RECREATIONAL, HOBBY, AND LEISURE ACTIVITIES

1. Describe your involvement as a child and as an adult in sports, recreation, hobbies, or other individual and group activities. Consider activities such as gymnastics, basketball, soccer, softball, football, frisbee, ultimate, volleyball, coaching, camping, fishing, boating, climbing, swimming, skating, skiing, dancing, track, cheerleading, bicycling, hunting, hiking, diving, surfing, snow boarding, T-ball, golf, riding, racquet ball, martial arts, hobbies, arts, crafts, theater, reading, writing, travel, collecting, singing, dancing, toy and scale modeling, fashion modeling, photography, computer, 4-H, FFA, Indian Guides or Princesses, Scouts, shop, sewing, cooking, gardening, astronomy, chess, etc.

year started	year stopped	name or type of activity	description of participation	if you have stopped participating, please explain
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	and a company to the control of the				
		ds of unemploym	ent in the last 10 years that v	vere longer than 30	days and that did not occur
tarted	stopped mo/year	age when unem- ployment started	reason	/circumstance causing t	unemployment
1	1	yrs.			
_/		yrs.			
	/	yrs.			
o/year	mo/year	job started yrs.		per week	stopped
o/year	mo/year	job started		per week	stopped
	annual supplementary of the su				
	1 1	Vrs		1 1	
1	<u> </u>	yrs.			
And the second s		yrs.			
		yrs.			
	/_ /_ /_ /_	yrs.			
n which	h you were	yrs. yrs. yrs. yrs.	what are the three most rece asked to resign, laid off, or re	ent positions that we not had your contract hours worked per week	ere not already mentioned about renewed at any time in you reason/circumstance employme stopped
n which	h you were	yrs. yrs. yrs. yrs. yrs. he past ten years, dismissed, fired,	asked to resign, laid off, or r	hours worked	reason/circumstance employme
n which	h you were	yrs. yrs. yrs. yrs. yrs. he past ten years, dismissed, fired,	asked to resign, laid off, or r	hours worked	reason/circumstance employme
n which	h you were	yrs. yrs. yrs. yrs. he past ten years, dismissed, fired, age started yrs.	asked to resign, laid off, or r	hours worked	reason/circumstance employme
tarted o/year	stopped mo/year	yrs. yrs. yrs. yrs. yrs. he past ten years, dismissed, fired, age started yrs. yrs. yrs. yrs.	asked to resign, laid off, or r	hours worked per week	reason/circumstance employme
m which	stopped mo/year	yrs. yrs. yrs. yrs. yrs. he past ten years, dismissed, fired, age started yrs. yrs. yrs. yrs.	asked to resign, laid off, or r	hours worked per week	reason/circumstance employm

VIII. MILITARY SERVICE

Describe your history of military service. Include in chronological order each rate and rank you held and include each geographical location in which you were stationed.

mo/year started at service location	age at the	locations(s) where stationed	service	branch, rate, and rank
	yrs.			
/	yrs.			
1	yrs.	·		
1	yrs.			
	yrs.			
	yrs.			
1	yrs.			

IX. CURRENT AND PAST LEGAL HISTORY

1. List any child, juvenile, divorce, parenting, paternity, family law, or matrimonial law matter in which you have been involved as a child or as an adult party, plaintiff, defendant, petitioner, respondent, or witness. Include such matters as any legal separation, divorce, paternity, modification, child custody or visitation matter, juvenile court matter, dependency matter, termination of parental rights, or guardianship of any sort.

mo/year of each matter or event	type of legal matter	other party(ies) involved	outcome of matter
/			
/			

2. List any union grievance, agency, professional, governmental, or administrative law matter of which you have been the subject. Include such matters as claims, hearings or meetings of the Equal Employment Opportunity Commission, Labor & Industries, Civil Service, Professional Licensing, Social Security, Unemployment Commission, Labor Union, Labor-Management Dispute Resolution, any type of claim, grievance, discipline cell, union, or other professional, ethical, or disciplinary complaint or hearing.

mo/year of each matter or event	type of legal or administrative matter	other party(ies) involved	outcome of matter
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3. List any union grievance, agency, professional, governmental, or administrative law matter in which you have been selected to serve as an administrator, judge, juror, mediator, arbiter, labor or management representative, employee representative, examiner, board member, committee member, reviewer, or witness.

mo/year of each matter or event	type of legal or administrative matter	how you got selected to serve	your role in the process
	Control Contro		
			VA
/		}	

4. List any civil law or business law matter in which you have been involved in any capacity, including being involved as a witness. Include such matters as personal injury claims, insurance claim, disability, defamation, breach of contract, and malpractice, and any other personal, financial, injury, or personal or property-related torts or suits as a witness, plaintiff, claimant, or defendant.

mo/year of each matter or event	type of legal matter	other party(ies) involved	outcome of matter
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5. List any misdemeanors or criminal activity which you have ever been accused of, been engaged in, been charged with, or been convicted of. Remember that you may decline to provide any answers that might tend to incriminate you. Include such activities as truancy, running away, major traffic offenses, shoplifting, pickpocket, theft, auto theft, burglary, robbery, forgery, blackmail, extortion, fraud, soliciting, pimping, prostitution, using a prostitute, any drug offense, drug possession, drug sales, forging prescriptions, arson, vandalism, damaging property, contributing to the delinquency of a minor, telephone harassment, sexual harassment or assault, stalking, indecent liberties, rape, or any other illegal sexual behavior, other assault, battery, domestic violence allegation, mugging, illegal weapon use, manslaughter, or homicide, or other criminal or civil action, offense, or misdemeanor not already mentioned.

mo/year of each matter or event	type of legal matter	other party(ies) involved	outcome of matter
/			
/			
		9	

6.	I have, or someone else	has on my behalf.	, posted a bond,	paid damages,	or paid com	pensation on m	y behalf	y/r
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- 7. I have been placed on probation or parole or house arrest or under someone's legal supervision or custody ... y / n
- 8. I have been placed in a detention center, halfway house, jail, prison, or other correctional institution y/n

X. ALCOHOL USE HISTORY

Describe your use of alcohol during each of the following time periods in your life and indicate the years (e.g., 1947 to 1959) during which you were the specified ages (e.g., birth to 13).

	what (e.g., beer, wine, hard liquors, mixed drinks, sherries, liqueurs, brandy, cognac)	where (e.g., home, job, bars, parties, sporting events, restaurants)	when (e.g., days, before dinner, with dinner, evenings, weekends, holidays)	how often (e.g., number of times each day, week, month)	how much you drank each time (e.g., # of 10 oz. drinks)
birth to 13	beer/malt liquor				
*100751	wine/wine coolers				
years:	hard liquor/cocktails/mixed drinks				
19	port/sherry/liqueur/cognac				
to	other/comments:				
ages 14-17	beer/malt liquor				
Mane.	wine/wine coolers				
years:	hard liquor/cocktails/mixed drinks		A Principle of the Control of the Co		
19	port/sherry/liqueur/cognac			A CONTRACTOR OF THE CONTRACTOR	
to	other/comments:			entra constantina de la constantina della consta	
ages 18-21	beer/malt liquor				
years:	wine/wine coolers			- Address - Addr	
	hard liquor/cocktails/mixed drinks				
19	port/sherry/liqueur/cognac				
to	other/comments:			And the second s	
ages 22-29	beer/malt liquor	T.			
years:	wine/wine coolers				
•	hard liquor/cocktails/mixed drinks				
19	port/sherry/liqueur/cognac				
to	other/comments:				
ages 30-39	beer/malt liquor				
years:	wine/wine coolers				The second secon
2.600	hard liquor/cocktails/mixed drinks				
19	port/sherry/liqueur/cognac				
to	other/comments:				
age 40+	beer/malt liquor	The state of the s			
years:	wine/wine coolers				
years.	hard liquor/cocktails/mixed drinks				
19	port/sherry/liqueur/cognac				
to present	other/comments:				

XI. DRUG AND SUBSTANCE USE HISTORY

Describe your use of drugs and other substances during the following six periods in your life. Describe all of your use of illicit, illegal, non-prescribed, and recreational substances in each period. Be specific. Be complete for each period. Indicate the years (e.g., 1959 to 1962) during which you were the specified ages (e.g., ages 14 to 17).

Include your use of marijuana (e.g., grass, pot, bud, weed, joints, hashish), stimulants (e.g., amphetamines, uppers, speed, diet pills, ice), tranquilizers (e.g., Valium, Librium), downers (e.g., barbiturates, barbs, Quaalude, ludes, soapers, reds), cocaine (e.g., coke, crack, rock), narcotics (e.g., opium, morphine, heroin, horse, smack, methadone, codeine), hallucinogens (e.g., acid, LSD, blotter, PCP, angel dust, mushrooms, microdot), designer drugs of any sort, toxic liquids or substances (e.g., glue, cough medicine, fuel), any other nonlegal or recreational drugs, and any prescription drug other than as was prescribed by your physician.

	what (e.g., cocaine, acid, marijuana, hash, Percocet, Valium)	where (e.g., home, job, restaurants, parties, recreation)	when (e.g., days, evenings, weekends, holidays)	how often (e.g., number of times each day, week, or month)	how much you used each time (e.g., # of grams, joints, pills)
birth to 13					
years:					
to					
ages 14-17					
years:					
to					
ages 18-21					
years:					
to					
ages 22-29					
years:					
to	and the second s				
to	and the second s				
ages 30-39					
years:					***************************************
40					
to					
age 40+					
years:					
to the present					
					3

XII. HEALTH HISTORY

1. If you have ever had any significant disorder, illness, injury, trauma, accident, or health condition, or had significant medical, dental, or physical treatment, or been hospitalized for any physical, medical, substance use, or mental health reason, give approximate dates and the name of each care provider for each condition.

mo/year of each injury or condition	type of disorder, illness, or injury	name of doctor or hospital	medication(s) prescribed
/			

2. Indicate any treatment as a child or as an adult, individually or with others, with a school counselor, school psychologist, social worker, pastor, minister, physician, clinical psychologist, or psychiatrist. Include any type of therapist who provided individual, couples, family, group, impatient, or outpatient treatment of any sort, and any therapy for which you were prescribed medication for any psychological or medical condition such as sleeplessness, stress, anxiety, or depression. Give the approximate date that the counseling started and ended, the name and location of each counselor, and the approximate number of sessions that you saw each counselor.

starting mo/year	ending mo/year	total number of sessions	name of counselor or therapist	type of counseling (e.g., individual, group, psychoanalytic, pastoral)	medication(s) prescribed
1		10.75			
1	/				
/	/	Addition St.			

3. If you have ever attended any parenting classes, anger management classes, marriage encounter seminars, A.A. or N.A. meetings, or other psychologically oriented meetings, information school, classes, or seminars, give the name of each class, the approximate starting and ending date, and the total number of hours spent in classes or meetings.

starting mo/year	ending mo/year	name or type of class, group, or seminar	total number of hours attended

XIII. ADDITIONAL INFORMATION

1. Please list each additional significant pleasurable event in your life that might not be adequately reflected in your previous answers. Include the approximate date of each event. Consider events such as academic, athletic, or artistic events; being in love; an award or special recognition; purchase of property; or a proud moment with your family and friends. There is no need to repeat information already presented unless you wish to emphasize or clarify something.

mo/year	pleasurable event, experience, or memory during childhood and adulthood
/	

2. Please list each additional significant unpleasant event in your childhood and adulthood that might not be adequately reflected in your previous answers. Include the approximate date of each experience. Consider events such as relationship, family, or employment difficulty; parent-child problem; financial difficulty; theft; miscarriage or abortion; contact with authorities; harassment; abuse; other assault or insult; or accident or illness of self or one close to you. There is no need to repeat information already presented unless you wish to add, emphasize or clarify something.

mo/year	unpleasurable event, experience, or memory during childhood and adulthood		
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completed this questionnaire on		I worked about	total hours completing i
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Thank you for	the time and effort that it took	for you to complete this ques	tionnaire.

The wisdom, kindness, and generous assistance of Douglas Allmon, Laura Asbell, Andrew Benjamin, Hanan Berman, Stanley Brodsky, Allison Card, John Dunne, John Everett, Fran Ferder, Edward Goldenberg, Alan Goldstein, Marsha Hedrick, Wren Hudgins, Wendy Hutchins-Cook, Paul Lees-Haley, Francis Kulick, Elizabeth Loftus, Mark Mays, Larry McKnight, Kevin Moreland, Elizabeth Nyblade, Naomi Oderberg, Robert Odgers, Michael O'Leary, Ira Packer, Leslie Rawlings, James Reilly, Phillip Resnick, Gerald Rosen, Carole Seegert, David Shapiro, Daniel Shuman, James Tracy, Robert Wheeler, Gary Wieder, Nicholas Wiltz, Sally Wing, and Roger Wolfe are gratefully acknowledged in the editing and shaping of these questionnaires. The errors and omissions remain the responsibility of the author.

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