

Please complete form, then click the Submit button to send info. You also may print it after filling it out.

SIGDALSLAG GENEALOGICAL SURVEY



MY NAME: _____
ADDRESS: _____
CITY: _____ STATE/PROVINCE: _____ POSTAL/ZIP CODE: _____
E -MAIL ADDRESS: _____ PHONE: _____
MY RELATIONSHIP TO FIRST IMMIGRANT: _____

FIRST IMMIGRANT

The following questions are to be answered with reference to the **First Immigrant** ONLY. If you have more than one person to report on, please submit another form. In the case where more than one generation came at one time use the oldest person as the first immigrant and mark the other immigrants with an *.

NAME (NORWAY) _____
(FIRST) (PATRONYMIC) (FARM)

NAME (US) _____

Birth date _____ Birth place _____
Death date _____ Death place _____
Marriage date _____ Marriage place _____

FULL NAME OF SPOUSE _____
Birth date _____ Birth place _____
Death date _____ Death place _____

CHILDREN BORN IN NORWAY: (please use full names, dates if possible)

CHILDREN BORN IN US: (full names, dates)

Immigration year _____ Transportation & Route _____
Others who came at same time _____
Names of family or friends who were already in America _____
Original settlement place _____
Did they move? where? when? _____
Did they homestead? _____
Occupation in Norway _____
Occupation in US _____
Military service _____
Public service _____
Church affiliation _____

Is there a family tradition about what life was like in Norway

What was life like in the US?

Complete each succeeding generation after the first immigrant.

FIRST GENERATION

FULL NAME _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Marriage date _____ Marriage place _____
Lived most of life at _____
Occupation _____ Education _____
Children(full names and dates)

FULL NAME OF SPOUSE _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Occupation _____ Education _____
Ethnic background _____

SECOND GENERATION

FULL NAME _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Marriage date _____ Marriage place _____
Lived most of life at _____
Occupation _____ Education _____
Children(full names and dates)

FULL NAME OF SPOUSE _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Occupation _____ Education _____
Ethnic background _____

THIRD GENERATION

FULL NAME _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Marriage date _____ Marriage place _____
Lived most of life at _____
Occupation _____ Education _____
Children(full names and dates)

FULL NAME OF SPOUSE _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Occupation _____ Education _____
Ethnic background _____

FOURTH GENERATION

FULL NAME _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Marriage date _____ Marriage place _____
Lived most of life at _____
Occupation _____ Education _____
Children(full names and dates)

FULL NAME OF SPOUSE _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Occupation _____ Education _____
Ethnic background _____

FIFTH GENERATION

FULL NAME _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Marriage date _____ Marriage place _____
Lived most of life at _____
Occupation _____ Education _____
Children(full names and dates)

FULL NAME OF SPOUSE _____
Birth date _____ Birth place _____
Death date _____ Death place _____
Occupation _____ Education _____
Ethnic background _____

Additional comments/ information:

Click the SUBMIT button to send your information to the Sigdalslag genealogist.

Click only ONCE

Click the RESET button to clear all your Information and start over.