Vital Statistics Worksheet

New Tradition Funeral Services

Decedent's Legal Name				Sex	Date of Birth
County of Death	Age	Social Security Number			Date of Death
City of Death	Hospital, Institution, or Street Address				
Birthplace (City & State, or Foreign Country)	Marital Status**	Surviving Spouse's Name (First & Maiden Name)			
Father's Name	Mother's Name (First & Maiden Name)				Armed Forces?
Decedent's Street Address				Apt.	City or Town
County	State	Zip Code	In City Limits?	Informant's Name	
Relationship	Informant's Address				

Decedent's Highest Level of Education

- ☐ 8th Grade or Less
- ☐ 9th-12th Grade - No Diploma
- ☐ High School Graduate or GED
- ☐ Some College Credit, but No Degree
- ☐ Associate's Degree
- ☐ Doctorate
- ☐ Bachelor's Degree
- ☐ Unknown
- ☐ Master's Degree

Hispanic Origin?

- ☐ No, not Spanish/Latino/Hispanic
- ☐ Yes, Mexian, Mexican American, Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, Other:
  Specify: _____

Decedent's Race

- ☐ White
- ☐ African American, Black
- ☐ American Indian or Alaskan Native
  Name of Tribe: _____
- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian (Specify): _____
- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Other Pacific Islander (Specify): _____
- ☐ Other (Specify): _____

Occupation (Do not use "retired")

Business/Industry

**Acceptable Options for Marital Status

-Married	-Civil Union
-Married but Separated	-Civil Union but Separated
-Widowed	-Surviving Partner of Civil Union
-Divorced from Marriage	-Divorced from Civil Union
-Never Married	-Unknown