

Life Experience Profile:

Name of your loved one: _____

Birthdate of your loved one: _____

Where did your love one grow up? _____

Where/With whom does your loved one currently live? _____

Who is the primary caregiver? Do you have any outside help? _____

What was your loved one's occupation? _____

What was your loved one's religion? Are they still practicing? _____

Where did your loved one go to school? College? What did they study? What did they enjoy doing? Clubs?

What activities and hobbies did your loved one enjoy doing?

- Religion
- Community Service
- Sports
- Clubs/Organizations
- BINGO/Bridge/Cribbage
- Painting
- Sewing
- Other crafts
- Reading
- Magazines/Newspapers
- Playing Sports
- Watching Sports
- Crosswords & Word Searches

Tell us any other activities and hobbies your loved one enjoyed doing:

What activities and hobbies does your loved one currently do? _____

Tell us about your loved one's daily routine. What time do they wake up? Eat breakfast?
Shower? Go to bed? _____

Tell us about your loved one's current habits. Do you notice them doing something over and
over again? Mentioning the same person or telling the same story? Do they get agitated when
doing certain tasks? _____

Any other information you think might be useful to put together a personalized life enrichment
plan for your loved one. _____

