

DUE DATE: \_\_\_\_\_

## PARENT INTERVIEW LIFESTYLE HEALTH INTERVIEW

### FAMILY HISTORY WORKSHEET

**\*Do Not Write Down Any Answers\***

**1. Have any of your grandparents ever had any of these health problems?**

	ALCOHOLISM	HEART DISEASE	CANCER
Mothers/mother	_____	_____	_____
Mothers/father	_____	_____	_____
Fathers/mother	_____	_____	_____
Fathers/father	_____	_____	_____

**2. Have any of these relatives had any of these health problems?**

	ALCOHOLISM	HEART DISEASE	CANCER
Mothers/sisters	_____	_____	_____
Mothers/brothers	_____	_____	_____
Fathers/sisters	_____	_____	_____
Fathers/brothers	_____	_____	_____

**3. Have any of these relatives had any of these health problems?**

	ALCOHOLISM	HEART DISEASE	CANCER
Father	_____	_____	_____
Mother	_____	_____	_____
Sister(s)	_____	_____	_____
Brother(s)	_____	_____	_____

**We have discussed the information above.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

DUE DATE: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## **ALCOHOL USE PARENT INTERVIEW**

**\*Do Not Write Down Any Answers\***

### **STATE OF WISCONSIN EXPECTATION:**

It is illegal in Wisconsin for people to purchase alcohol if they are under age **21**.

### **School District of Beloit and Beloit Memorial High School Expectation:**

Students are expected to abstain from alcohol and drugs at school and all school functions.

### **My Parents Expectations:**

1. How do you feel about abstinence and or alcohol use by adults? By teens? What important personal values play a role in how you feel about this? Have you shared these feelings and values with your child
2. Do you want your teen to abstain completely? Is it acceptable to you if your son or daughter drinks under certain conditions? If so, what are those conditions? How much would and would not be acceptable? Under what conditions, if any, is it totally unacceptable to you that they would drink?
3. What do you want your children to do if someone they are riding with or had planned to ride with has been drinking?
4. How will you respond if your child does not do what you want them to do when it comes to alcohol? What consequences will you give? Have you told this to you child in a clear and calm way? Are you prepared to monitor their behavior? Are you willing to follow through with these consequences?
5. What will you say or do to show your respect and appreciation each time your child does do what you expect when it comes to alcohol? Are you prepared to follow through with these positive consequences?

**We have discussed the information above.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date