

**THE CHURCH OF ST. ROSE OF LIMA**  
2 BAYVIEW AVENUE, MASSAPEQUA, NY 11758  
Phone: 516-798-4992 - Fax: 516-795-7836

*Dear Friends,*

*The Parish Community of St. Rose of Lima extends our sympathy and love at this time of your loss. In an effort to make the Funeral Liturgy a fitting tribute to your loved one, and as personal as possible, we ask you to fill out this short biography and return it to the Funeral Director who will forward it to the church well before the Funeral Mass. We thank you for your time, and please be assured of our prayers.*

*Sincerely,*

*Rev. Gerard Gentleman, Pastor*

**DECEASED'S NAME** \_\_\_\_\_

**DATE OF DEATH** \_\_\_\_\_

**FUNERAL DATE** \_\_\_\_\_ **DAY** \_\_\_\_\_ **TIME** \_\_\_\_\_

**PERSONAL HISTORY WORKSHEETS - page 1**

Name you wish the deceased to be called: \_\_\_\_\_

Place and date of Birth: \_\_\_\_\_

Married/Years:\_\_\_ Divorced Separated Single—Never married

Spouse's Name: \_\_\_\_\_ Living Deceased

Parishioner of SROL: Yes/Number of years \_\_\_\_\_ No

Children's names \_\_\_\_\_  
Please indicate if living (L) or deceased (D)

Parents: \_\_\_\_\_  
Please indicate if living (L) or deceased (D)

Siblings: \_\_\_\_\_  
Please indicate if living (L) or deceased (D)

# of Grandchildren \_\_\_\_\_ # of Great-grandchildren \_\_\_\_\_

**THE CHURCH OF ST. ROSE OF LIMA - PERSONAL HISTORY WORKSHEET - page 2**

**DECEASED'S NAME** \_\_\_\_\_ **FUNERAL DATE** \_\_\_\_\_ **TIME** \_\_\_\_\_

1. What are some of the qualities that make this person special? (i.e., caring, a great listener, brought out the goodness in others, loving, hard working, sense of humor, family centered, overcame great obstacles, courageous..)

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2. Occupation: \_\_\_\_\_

3. Special Interest/Hobbies/Talents: \_\_\_\_\_

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4. Any special family gatherings or celebrations in recent years? \_\_\_\_\_

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5. Was this a lingering illness or sudden death? \_\_\_\_\_

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6. Who were the primary caregivers during his/her illness? \_\_\_\_\_

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7. How did this person see his/her relationship with God? (Mass, Rosary, involvement in Parish Ministry or Community Service...) \_\_\_\_\_

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8. Please add any additional information you feel would be helpful to the Priest: \_\_\_\_\_

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