



Resident Profile Interview Checklist

TSOLife brings you the **first resident profile interview of its kind** - backed by hours of finding the perfect questions and resident profile research. Our dedicated team knows the importance of onboarding your new residents efficiently and meaningfully, so let's get started.

These questions are optimized to be recorded with the TSOLife mobile app. With the TSOLife app, all you have to do is press record and have a one-on-one conversation with your new move-in. We create the digital resident profiles for you.

Think of these questions as guidelines to help you along the way, and let the in-depth conversations flow. Have fun!

1. THE BASICS

- ☐ What is your name?
- ☐ Do you have any nicknames?
- ☐ What do you prefer to be called?
- ☐ What is your primary language?
- ☐ Are you right or left-handed?
- ☐ Tell me a little about yourself.

2. GROWING UP

- ☐ When and where were you born?
- ☐ What are your favorite memories from your childhood?
- ☐ What memory can you share of your favorite holiday?
- ☐ What places did you live and what were they like?
- ☐ Tell me about your friends growing up.
- ☐ What hobbies did you enjoy when you were young?

3. FAMILY

- ☐ Tell me a little about your family.
- ☐ Talk about your parents. What were they like?
 - What are your parents' names?
- ☐ Do you have siblings?
 - What are their names?
 - How old are your siblings and when are their birthdays?
- ☐ Are you married?
 - What is your spouse's name?
 - When is your anniversary?
 - How did you meet?
- ☐ Do you have any children?
 - What are your children's names?
 - Children's place of residence
 - Contact info
 - Do you have grandkids/great-grandkids?
- ☐ Tell me about raising a family.
 - Memories/highlights
 - Vacations
 - Lessons learned
 - Significant events

4. CAREER & MILITARY SERVICE

- ☐ What did you do for work?
 - Companies
 - Years of service
 - Year retired
- ☐ Were you in the military?
 - Years served
 - Rank
 - Service during war?
 - Awards and recognition received?
 - Places stationed
 - Did your spouse serve in the military?

5. EDUCATION

- ☐ Tell me about your education.
 - Education level
 - Names of schools
 - Degrees
 - Did you participate in any sports or other activities while there?

6. DAILY ACTIVITIES & INTERESTS

- ☐ What does a typical day look like for you?
 - Morning, evening routines
- Hobbies/Activities**
- ☐ What kinds of hobbies or interests do you have?
- ☐ Would you say that you are satisfied with your leisure time? That is, that you have the opportunity to do what you want and to relax and enjoy yourself?
- ☐ Would you say that your leisure time is important to you?
- ☐ Do you enjoy doing things with other people or more on your own?
 - Small groups
 - Large groups
- ☐ What board games or card games do you enjoy?

- ☐ Are you a member of any clubs?
- ☐ What kinds of physical activities do you like to do now?
- ☐ Do you enjoy watching sports?
 - Favorite sport(s)
 - Favorite team(s)
- ☐ Do you like movies or television?
 - Favorite movies
 - Favorite TV shows

Creativity/Arts

- ☐ How satisfied are you with your opportunities to be creative?
- ☐ Would you say being able to be creative is important to you?
- ☐ Are you interested in any arts?
- ☐ Do you have any musical interests?
 - Play an instrument?
 - Favorite kind of music?

Learning

- ☐ How satisfied are you with your learning [opportunities]?
- ☐ How important to you is learning and having the opportunity to learn?
- ☐ What do you enjoy studying or what would you like to learn about?
- ☐ Do you speak any other languages?
- ☐ Do you like to read?
 - Favorite reading materials
 - Favorite author(s)
- ☐ Are there any activities that you would be interested to try?

- ☐ What kind of activities would you like to participate in?

- ☐ Are you technology savvy?
- Technology used
 - Names of websites visited

7. FAITH & RELIGION

- ☐ Do you consider yourself a religious person?
- What denomination?
 - Attend church regularly?
 - Involved in other activities?
 - Have you held any roles like choir member, pastor, deacon, Sunday school teacher, etc.?
 - What kinds of personal faith activities do you enjoy?
 - Bible Study
 - Prayer
 - Hymn singing

- ☐ What could we provide to support your spiritual journey?
- Church services
 - Prayer groups

8. VALUES

- ☐ What things do you value in life? What are things that mean a lot to you?
- ☐ What do you find fulfilling or gives you a sense of purpose?
- Community/charity work/volunteering
 - Creative activities
- ☐ What do you want to do with your life?
- ☐ Would you say you are satisfied with how you view your life?
- ☐ Is how you view your life important to you?

9. LOOKING BACK & WITHIN

- ☐ In the spirit of reflecting on your life and talking about what you like to do now, would you say that you are satisfied with yourself as a person?
- In other words, do you like and respect yourself?
- ☐ How important is your satisfaction with yourself as a person to you?
- Is how you view yourself important to you?
- ☐ Is there anything you wanted to do that you didn't get to or that you wish you would have done differently along the way?
- ☐ What are some places you've traveled?
- ☐ What are your biggest fears?
- ☐ What are your biggest concerns?
- ☐ What are you most proud of in life?

10. TAKING CARE OF YOU

- ☐ What do you do to pamper yourself?
- Makeup?
 - Manicures/pedicures?
 - Hair?
- ☐ Is there anything that we can help you with to keep you comfortable?
- ☐ What calms you and/or reassures you in times of stress?
- ☐ What can we do to make you happy?
- ☐ How satisfied are you with your health?

11. OTHER LIKES & DISLIKES, THINGS TO NOTE

- ☐ What kinds of foods do you like?

- ☐ Any foods that you don't like?
- ☐ Do you like to cook?
- ☐ Do you drive?
 - Make/model of car
 - Valid driver's license
 - ID card
- ☐ Are you registered to vote?
- ☐ Have you ever won an award/received an achievement of note?
- ☐ Do you have any pets?
 - Type of pet
 - Pet name
 - Vaccination records
- ☐ Have you ever had or worked with any other animals?
- ☐ Are there any animals that you're afraid of?
- ☐ Why did you choose to move into a community?
- ☐ Where did you move from?
 - Location or address
 - Rent or own?
- ☐ Why did you choose this community?

12. FRIENDSHIPS

- ☐ How important are friends and friendships to you?
- ☐ Currently, do you have friends that you associate with and who support you?
 - If so, do you have as many of these types of friends as you want and need?
 - How satisfied are you with your friends and friendship?

- ☐ What are some things you would like others to know about you?
- ☐ If someone wanted to get to know you and become a friend, what would be the best way?

For more information on how TSOLife can help your community's move-in process or questions, please contact Daniel.Sharits@tsolife.com.