Fill in the following details in the table below to record your own personal characteristics.

|  |  |  |
| --- | --- | --- |
| **Identity** | **Variable** | **Your information** |
|  | Age |  |
| Physical  Identity | Height |  |
|  | Hair Colour |  |
|  | Gender |  |
|  |  |  |
| Family  Identity | Place and date of birth |  |
|  | Siblings |  |
|  | Birth order |  |
|  | Parents/guardians |  |
|  | Family history |  |
|  | Family traditions |  |
|  |  |  |
| Social  Identity | Language (s) spoken at home |  |
|  | Race |  |
|  | Nationality |  |
|  | Community/neighbourhood |  |
|  | Sports teams |  |
|  | Hobbies/interests |  |
|  | Religious beliefs |  |