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Graphology Solutions

Date.....

Graphology Analysis Form

Name and Surname:.....Mr/Mrs/Miss/Ms

Date of birth:.....Sex:.....

Company:.....

Address:.....

e-mail address:.....

Writer is left-handed/right-handed (mark as appropriate).....

Nationality:.....

Level of education:.....

Profession:.....

Fluency in the language used in the Sample of Handwriting.....

Medical conditions that may affect the author's handwriting (e.g. dyslexia, heart problems etc):.....

Purpose of the graphology analysis:.....

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The Authors signature