

Attn: Loni Ding

VOX

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NISEI VETERANS & FAMILY
Interviewee form

Name James Oda (Maiden name also, if applicable)

(please print)
Place of birth Calif.

Place of upbringing, if different Japan + American

Number in family 5 What position in the family were you? Eldest

What were the occupations of your mother? school teacher and
your father? Farmer

What village/district in Japan were they from? Kobe

Did your parents provide explicit training in Japanese language, customs and values?

yes no somewhat

Please give examples:

How much education did you have? high school college

If you went to college, where, and what did you major in?

Science, Hemeji College

OUTBREAK of WAR

How old were you at war time? 29 How old were other members of family? _____

Were you and your family evacuated? yes from where? LA

When were you evacuated? March 1942 What assembly center were you taken to?

Directly to Manzanar

Which camp(s) were you detained in? Manzanar

Did you leave camp to go to work or college? _____ If yes, please explain.

What year did you enter the service? Yes Where were you at the time? Manzanar

Were you a volunteer? Yes a draftee? _____

MILITARY

Where did you serve? Minnesota

Which unit(s) were you with? MIS

What kind of work did you do? Teaching

Who were some of the other nisei in your unit? _____

Are you still in contact? _____

Who were some of your immediate officers? Judge Aiso

Are you still in contact? _____

FOR M.I.S. VETERANS:

Did you serve in the occupation of Japan? Yes

If so, where? Tokyo Doing what? History

Under whose command? Wiloughby

How long did you serve there? _____ Did you get to know any Japanese nationals with whom you are still in contact? _____

Which other nisei served with you there? _____

Are you still in contact? Yes

POST-WAR (Veterans and Family please answer)

Did you return to your home area after the war? _____

What situation did you return to? _____

If you have children, how old are they? What do they do, and where do they live?

Attorneys

Thank you.

● CURRENT INFORMATION (Date: _____)

Name: _____

Address: _____

Zip _____

Phone(s) home and work: _____