



Friends of the Family

Healthy relationships. Healthy homes.

# MENTOR REQUEST FORM

**Husband / Groom**

**PLEASE RETURN** this form to **Friends of the Family** (FOFM) **along with the administration fee**. This information is considered confidential – *only* for the eyes of FOFM’s *Marriage Mentoring Intake Coordinator*, the mentor couple with whom you are matched, and others that you specifically name below. Please answer thoughtfully, as this will assist us in serving you the best way possible.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Today’s Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_ Preferred E-mail Address: \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_ Highest Level of Education: \_\_\_\_\_

Member/Regular Attendee at an area church?  YES  NO

If yes, which church? \_\_\_\_\_ How long attending? \_\_\_\_\_

How did you hear about FOFM’s Marriage Mentoring program? \_\_\_\_\_

Why do you want to be mentored? \_\_\_\_\_

### **For Pre-Marital Only:**

How long have you known each other? \_\_\_\_\_ How long dating? \_\_\_\_\_

How long officially engaged? \_\_\_\_\_ Tentative wedding date? \_\_\_\_\_

Where will the wedding be? \_\_\_\_\_

### **More About You**

Occupation: \_\_\_\_\_

Hobbies (please be specific): \_\_\_\_\_

Pet Peeves: \_\_\_\_\_

Strengths: \_\_\_\_\_

Weaknesses: \_\_\_\_\_

Check the answer below that best describes you spiritually:

- Seeker/not yet a Christ follower
- New Christian
- Committed Christian
- Agnostic
- I’m not sure what I believe
- Other:

## Marital Status

**Husband / Groom (con't)**

How long have you been married to your current spouse? \_\_\_\_\_

Have you been previously married? \_\_\_\_\_ How many times? \_\_\_\_\_

How long were you married? \_\_\_\_\_ When was the divorce final? \_\_\_\_\_

Reason for the divorce: \_\_\_\_\_

Did you try to reconcile? \_\_\_\_\_ Who filed for divorce? \_\_\_\_\_

Did your spouse commit adultery? \_\_\_\_\_ Did you commit adultery? \_\_\_\_\_

Were you a Christian at that time? \_\_\_\_\_ Was your spouse a Christian? \_\_\_\_\_

**Children?**  YES  NO If yes, names and ages of children:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Parents: Both Wife only Husband only

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Name: \_\_\_\_\_ Age: \_\_\_\_\_ Parents: Both Wife only Husband only

## MENTEE AGREEMENT

I, \_\_\_\_\_, understand that the Mentor Couple we meet with are not professional counselors, but volunteer marriage mentors who agree to share their life experiences with us and guide us in an effort to help us strengthen our marriage. I understand that we are responsible for the success of our own marriage and I do not hold our Mentor Couple responsible for the state of our marriage throughout the mentoring sessions or any time thereafter. I will allow *Friends of the Family*, our assigned mentors, and the church leaders specifically named below to access our personal information, as deemed necessary and helpful. All data collected by *Dare to be Different* (i.e., the *DARE Marriage Mentoring* online survey) will only be used as a quality control measure and will not be shared at any time with other parties.

Please sign here: \_\_\_\_\_ Date: \_\_\_\_\_

### **Church Leaders/Others to whom I grant permission to see this personal information:**

Name(s): \_\_\_\_\_ Church: \_\_\_\_\_

Role: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_ My Initials: \_\_\_\_\_

**PLEASE RETURN COMPLETED FORMS TO:**  
Administration Fee (\$100) can be mailed or  
paid online at [www.fofm.org](http://www.fofm.org)

Friends of the Family Mentoring  
685 NW 5<sup>th</sup> Street, Suite A  
Corvallis, OR 97330

OR Scan and Email to:  
[mentoring@fofm.org](mailto:mentoring@fofm.org)  
Questions? Call 541-757-1761



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# MENTOR REQUEST FORM

**Wife / Bride**

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Name: \_\_\_\_\_ Age: \_\_\_\_\_ Today’s Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_ Preferred E-mail Address: \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_ Highest Level of Education: \_\_\_\_\_

Member/Regular Attendee at an area church?  YES  NO

If yes, which church? \_\_\_\_\_ How long attending? \_\_\_\_\_

How did you hear about FOFM’s Marriage Mentoring program? \_\_\_\_\_

Why do you want to be mentored? \_\_\_\_\_

### **For Pre-Marital Only:**

How long have you known each other? \_\_\_\_\_ How long dating? \_\_\_\_\_

How long officially engaged? \_\_\_\_\_ Tentative wedding date? \_\_\_\_\_

Where will the wedding be? \_\_\_\_\_

### **More About You**

Occupation: \_\_\_\_\_

Hobbies (please be specific): \_\_\_\_\_

Pet Peeves: \_\_\_\_\_

Strengths: \_\_\_\_\_

Weaknesses: \_\_\_\_\_

Check the answer below that best describes you spiritually:

- Seeker/not yet a Christ follower
- New Christian
- Committed Christian
- Agnostic
- I’m not sure what I believe
- Other:

**Marital Status**

**Wife / Bride (con't)**

How long have you been married to your current spouse? \_\_\_\_\_

Have you been previously married? \_\_\_\_\_ How many times? \_\_\_\_\_

How long were you married? \_\_\_\_\_ When was the divorce final? \_\_\_\_\_

Reason for the divorce: \_\_\_\_\_

Did you try to reconcile? \_\_\_\_\_ Who filed for divorce? \_\_\_\_\_

Did your spouse commit adultery? \_\_\_\_\_ Did you commit adultery? \_\_\_\_\_

Were you a Christian at that time? \_\_\_\_\_ Was your spouse a Christian? \_\_\_\_\_

**Children?**  YES  NO If yes, names and ages of children:

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Please sign here: \_\_\_\_\_ Date: \_\_\_\_\_

**Church Leaders/Others to whom I grant permission to see this personal information:**

Name(s): \_\_\_\_\_ Church: \_\_\_\_\_

Role: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_ My Initials: \_\_\_\_\_

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