

Shidduch Form

Today's Date: _____

Contact's Name: _____

Home Phone Number: _____

Cell Phone Number: _____

E-mail Address: _____

Shidduch Information: Initials: _____

Age: _____ Gender: _____ Height: _____

Appearance/ Personality: _____

Religious Affiliation: _____

Divorced (y/n): _____ Widowed (y/n): _____

Children (y/n) _____ How Many? _____

Where does he/she live? _____

Willing to relocate (y/n)? _____

Education: _____

Occupation: _____

What sets he/she apart? _____

Interests: _____

What type of person is he/she looking for? Age Range: _____

College (y/n): _____ Professional (y/n): _____

Yeshivish (y/n): _____ Modern Orthodox (y/n): _____

Currently learning (y/n): _____ If yes, for how long? _____

Other Comments: _____
