Questionnaire | Pre-Marriage Counseling

INSTRUCTIONS: Please complete the questions individually first and then email your responses to LPCCounseling@golpc.org. After you send this form, we will pair you both with the next available Marriage Mentors. Your responses may be discussed together after you've finished them individually. They will be kept confidential, but should be fully transparent.

YOUR NAME:		F	PHONE:		EMAIL:			
FIANCE'S NAME:			PHONE:		EMAIL:			
MEMBERS OF LIFEPOINT? YES		YES	NO	CAMPUS	CAMPUS ATTENDANCE:		EAST WEST	
	IONS RELATIONAL DYN What do you most appr		ut your future s	spouse?				
2.	What strengths and wea	aknesses d	o you feel you	will bring to th	e marriage?			
3.	What are some areas of	f focus you	'd like to discu	ss during our p	ore-marriage couns	seling sessions	?	
4.	What are you most app	rehensive a	about concerni	ing marriage? \	What are you most	excited about?	,	
5.	In what ways are you co couples?	onnected no	ow and plan to	connect with	other newly marrie	d couples and	mentor	
6.	Have you been engaged relationships?	l or married	l before? How	many people f	nave you dated and	I how serious w	vere those	
7.	Which of the following a that apply. Finances Communication Sexual Intimace Husband/Wife Parenting Spiritual Grown Priorities in Life	on ry Roles th	marriage have	you and your fi	uture spouse discu	ussed already?	Check all	

8.	On a scale from 1-10 (1=low and 10=very high), how would you rate the following categories? Your level of togetherness concerning finances. Your level of communication. Your ability to reconcile/forgive. Your level of transparency with one another. Your spiritual maturity and alignment. Your relationships with in-laws and your own family Your views of finances (saving, spending, budgeting, investing).							
	IONS BIBLICAL MARRIAGE How and when did you become a Christian?							
2.	How would you define or describe what the gospel is?							
3.	What, if any, spiritual disciplines do you practice and how often?							
4.	W ç ç ç ç ç							
5.	According to Scripture, what would permit a person to divorce and remarry in your opinion?							
6.	Have you remained sexually abstinent in your relationship? Are you committed to sexual abstinence for the remainder of your engagement?							
	IONS FAMILY W ç ç ç							
2.	What is the marriage history in each of your respective families (<u>Ex</u> : Marriage, Remarriage, Divorce, Separation, Long Marriages, etc.)							
3.	Have you discussed your dreams concerning children? If so, what have those discussions included?							
+	Ç Ç Ç transparent, teachable, and proactive throughout the process of pre-marriage counseling.							