

Purpose of Match Form: To gather descriptive information about parents seeking support in order to facilitate a successful match with Parent-to-Parent Support Volunteers

PERSONAL INFORMATION

FIRST NAME:
LAST NAME:
STREET ADDRESS:
CITY:
STATE:
ZIP:
GENDER: Female Male

RELATION TO CHILD:
 Parent Grandparent Guardian Sibling
 Step Parent Adoptive Parent Foster Parent
 Other - Please Explain _____

PHONE:
EMAIL:
PREFERRED METHOD OF CONTACT: Phone Email

DEMOGRAPHIC INFORMATION

MARITAL STATUS:
 Single In a relationship Engaged Married Separated Divorced Widowed

EMPLOYMENT STATUS:
 Employed Unemployed Student Retired Other – Please Explain _____

NATIONALITY:
YEAR BORN:
PRIMARY LANGUAGE:
OTHER LANGUAGES:

ABOUT YOUR CHILD(REN)

YEAR BORN:
GENDER: Female Male

YEAR BORN:
GENDER: Female Male

YEAR BORN:
GENDER: Female Male

Do you have a special needs child? Yes No

If Yes, please specify the disability: _____

TOPICS

PRIMARY CONCERN/CHALLENGE YOU ARE FACING AS A PARENT (SELECT ONE):
 Parenting Duties Parent of Multiples Day Care Isolation Work/life/family balance
 Marriage/Relationship with spouse Little to no support from friends/family
 Finances Career Job Training Education Housing Medical Care

Other: _____

ADDITIONAL ISSUES YOU ARE FACING AS A PARENT (SELECT ONE OR MORE):
 Parenting Duties Parent of Multiples Day Care Isolation Work/life/family balance
 Marriage/Relationship with spouse Little to no support from friends/family
 Finances Career Job Training Education Housing Medical Care

Others: _____

OTHER TOPICS OF INTEREST (SELECT ONE OR MORE):

- Parenting two kids under two Parenting Multiples Parenting an only child
 Stay at home parents Work from home parents Working and Student Parents
 Adoptive and foster parenting Blended and Step Family parenting Multi-lingual parenting
 Multicultural parenting LGBT/Queer Parenting Single Parenting Attachment Parenting
 Baby wearing Diapering Breastfeeding Life with a toddler Life with a baby

OTHER FACTORS**PERSONALITY:**

- Perfectionist Helper Achiever
 Romantic Thinker Questioner
 Adventurer Leader Peacemaker

Other: _____

PARENTING PHILOSOPHY/STYLE:

- Authoritarian/Strict Authoritative/Balance of warmth and firmness Permissive/Relaxed

PERSONAL INTERESTS/HOBBIES:**NATURE**

- Recycling Gardening Composting Making birdfeeders/birdhouses

CREATIVE

- Painting Drawing Creative Writing Dancing Singing/Composing music Sculpting
 Interior Decorating Jewelry Making Arts & Crafts

COMPUTERS/TECHNOLOGY

- Social Networking Internet Browsing Blogging Computer Games Video Gaming

OUTDOORS

- Hiking Camping Traveling Kayaking Swimming

INDOOR

- Playing Cards Reading/Books Music Movies Pets Collector Bowling Pottery

HEALTH-RELATED

- Yoga Fitness Running Marathons Swimming

Others: _____

HOW DID YOU LEARN ABOUT GUIDING PARENTS?

- Internet Search Word of Mouth Advertisement Social Media
 Other - Please explain: _____