



REPUBLIC OF THE PHILIPPINES  
CITY GOVERNMENT OF LUCENA  
OFFICE OF THE COMMISSION ON POPULATION

## PRE-MARRIAGE COUNSELING INFORMATION SHEET

Date of Interview: \_\_\_\_\_

Interviewer: \_\_\_\_\_

Agency: \_\_\_\_\_

	MALE (LALAKI)	FEMALE (BABAE)
Name (Pangalan)		
Present Address		
Permanent Address		
Date of Birth		
Age		
Civil Status		
Highest Educational Attainment		
Occupation		
Monthly Income		
Name of Parent/Guardian		
No. of Children in the Family		
Number of Boys		
Number of Girls		
Still Living		
Deceased		
Give the ages of living and encircle those who are married		
Ordinal Position in the Family		
Name of Spouse to Be		
Length of Engagement		
Date of Marriage		
Desired Number of Children		
Contact Number		

ATTENDANCE IN THE FAMILY LIFE TRAINING/SEMINARS		
Type:	Date:	Venue:
Date of Pre-Marriage Counseling:		Venue:

Comments
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