



# FRIENDSPEAK CONVERSATIONAL ENGLISH PROGRAM

## PARTNER INFORMATION FORM

Date \_\_\_\_\_ Conversation Partner (if assigned) \_\_\_\_\_

Your Name \_\_\_\_\_  
(Family Name, First Name, Middle Name)

Name you prefer to be called \_\_\_\_\_

CIRCLE ONE: Male / Female    CIRCLE ONE: Married / Unmarried

Home Country, Province/State, City \_\_\_\_\_

Please give us your local (Knoxville) contact information. We will keep it private.

Mailing address (Street, Apartment Number, City, Zip Code) \_\_\_\_\_

\_\_\_\_\_

Phone number \_\_\_\_\_ E-mail address \_\_\_\_\_

Do you have a permanent e-mail or mailing address? \_\_\_\_\_

Do you have children? What ages? \_\_\_\_\_

Your occupation or field of study \_\_\_\_\_

Spouse's Name \_\_\_\_\_  
(Family Name, First Name, Middle Name)

Spouse's occupation or field of study \_\_\_\_\_

Do you have a religious preference or affiliation? \_\_\_\_\_

Do you participate in any other English Language programs? (Please Explain)

How long do you expect to be in Knoxville? \_\_\_\_\_

Are you interested in studying and discussing the Bible? \_\_\_\_\_

Do you need a Bible? \_\_\_\_\_

Would you like to visit our Sunday worship or Bible classes? \_\_\_\_\_