

# MUSLIM MATRIMONIAL INQUIRY FORM

**Islamic Society of the Washington Area  
2701 Briggs Chaney Road  
Silver Spring, Maryland 20905 USA  
Tel: (301) 879-0930 Fax: (301-879-6892**

Complete all of the information in this application in order for it to be processed properly.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Nationality: \_\_\_\_\_

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First Language: \_\_\_\_\_ Other Spoken Language: \_\_\_\_\_

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Highest Degree Obtained: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ How Long? \_\_\_\_\_

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Born in America? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, current visa status: Citizen \_\_\_\_\_ Immigrant \_\_\_\_\_

Non-Immigrant \_\_\_\_\_ Student \_\_\_\_\_ Number of years in USA: \_\_\_\_\_

Are you Divorced: \_\_\_\_\_ Widowed: \_\_\_\_\_ Single: \_\_\_\_\_

Have you been married before? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any children Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how many and how old? \_\_\_\_\_

If you would like or if needed, please explain the reason for divorce: \_\_\_\_\_

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How long have you been a Muslim? \_\_\_\_\_

Do you have any family in the USA? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give relationship and phone number: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

With whom do you live now? \_\_\_\_\_

Are you willing to relocate? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any medical problems worth knowing? \_\_\_\_\_

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I evaluate my Islamic knowledge to be:

Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Very Good \_\_\_\_\_

I like to spend my time: Reading \_\_\_\_\_ Studying \_\_\_\_\_ Visiting \_\_\_\_\_

TV& Radio \_\_\_\_\_ Other, specify \_\_\_\_\_

I attend Islamic Programs:

Weekly \_\_\_\_\_ Monthly \_\_\_\_\_ Occasionally \_\_\_\_\_ Rarely \_\_\_\_\_

List the things that you would not accept in your expected spouse (i.e. smoking, etc.):

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Describe your personality and character \_\_\_\_\_

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Preferences for matrimonial match. Check 1 or 2:

India, Pakistan, Bangladesh \_\_\_\_\_ Arab \_\_\_\_\_ Afro-American \_\_\_\_\_ European Muslim \_\_\_\_\_

Caucasian \_\_\_\_\_ Oriental \_\_\_\_\_ West Indian \_\_\_\_\_ Spanish \_\_\_\_\_ No Preference \_\_\_\_\_

Reference in United States:

Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

What is the maximum age difference you would accept? \_\_\_\_\_

For Sisters only:

Do you wear complete Hijab? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, are you willing to wear it when married? Yes \_\_\_\_\_ No \_\_\_\_\_ Undecided \_\_\_\_\_

Describe your expectations and requirements of your expected spouse: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Please enclose a clear picture with your name signed on the back.**

### **Declaration and Pledge**

To be completed by the candidate:

1. I, \_\_\_\_\_, hereby certify that the information given in this form is true, correct and complete in every respect.
2. If there is any change in the previous information I will inform the Service promptly.
3. I authorize the Service to utilize the information provided by me according to the needs of the Service.
4. I pledge to keep all the information given to me by the Service as confidential and to use it with extreme care.
5. I promise to inform the Service as soon as marriage takes place.
6. In the event of failure to arrange such marriage of subsequent thereto, I shall not hold the Service responsible thereof.

I pray to Allah to help me redeem my pledge. Aameen.

Signature of Candidate: \_\_\_\_\_