

# European Matching Application (First Generation)

|  |  |  |   |  |
|--|--|--|---|--|
| <p style="text-align: center;"><b>PHOTOS</b></p> <p>Please provide at least 2 photos: 1 clear face and 1 full length. An optional 3<sup>rd</sup> photo with family or in a group is helpful.</p>   | <p><b>Name (Last):</b> _____</p>   | <p><b>Given (First):</b> _____</p>   | <p><b>Middle</b></p>  |  |
|  | <p><b>Addr:</b></p> <p><b>City, St, Post Code:</b> _____</p>   | <p><b>Phone (home):</b> _____</p> <p><b>Phone (mobile):</b> _____</p>  |   |  |
| <p style="text-align: center;"><b>A Note About Photos</b></p> <p style="text-align: center;"><i>Photos should be in a .jpg or PDF format but not in Microsoft Word.</i></p>  | <p><b>Country of Residence:</b> _____</p>  |  | <p><b>Nationality:</b> _____</p>                              |  |
|  | <p><b>Gender:</b></p> <p>Male <input type="checkbox"/> Female <input type="checkbox"/></p>   | <p><b>Date of Birth:</b></p> <p>Day    Month    Year</p>   | <p><b>Spiritual Birthday:</b></p> <p>Day    Month    Year</p> |  |
| <p><b>Email Address:</b> _____</p>   |  | <p><b>Skype Address:</b> _____</p>   |   |  |
| <p><b>Academic Achievement Attained (See Codes on page 3):</b></p>   | <p><b>Height:</b> _____ cm</p> <p>                  _____ ft. _____ in.</p> <p style="font-size: small;">1 inch = 2.54 cm    1 cm = 0.3937 in.</p> | <p><b>Weight:</b> _____ Kg</p> <p>                  _____ lbs.</p> <p style="font-size: small;">1 lb = 0.45359 Kg    1 Kg = 2.2046 lbs</p> | <p><b>Blood Type:</b></p>                                     |  |
| <p><b>Local Church (City, Country):</b> _____</p>  |  | <p><b>Local Church Tel. No.:</b> _____</p>   |   |  |
| <p><b>Is your Current Marital Status Single?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> If legally married, you are not eligible for matching.</p>   |  |  |   |  |
| <p><b>Have you ever been:</b> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/></p> <p>Have you ever lived with someone outside of marriage? No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, for How Long? _____</p> <p>Number of Children, if any: Sons (    ) Daughters (    )</p>  |  |  |   |  |
| <p><b>Have you been Blessed?</b> No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, what Blessing Group? _____ What year? _____.</p> <p>If yes, did you complete the 3-Day Ceremony? No <input type="checkbox"/> Yes <input type="checkbox"/> Any Blessed Children? Boys (    ) Girls (    )</p> <p>Are you divorced? Yes <input type="checkbox"/> No <input type="checkbox"/> Date the divorce was finalized? _____ (must submit copy of divorce paper)</p> <p>Who is the responsible party for the breaking of the Blessing? You <input type="checkbox"/> Your spouse <input type="checkbox"/></p> |  |  |   |  |
| <p><b>Describe in Detail Any Health Issues:</b> A potential spouse needs to know about Serious Illnesses, Infertility, Venereal Disease, Physical Handicaps, Hereditary Diseases, etc. (Use the back of this page if necessary. Health Codes on page 3.)</p> <p>Are your doctor's Health check-up and HIV screenings attached? Yes <input type="checkbox"/> No <input type="checkbox"/></p>  |  |  |   |  |
| <p><b>AIDS:</b> HIV Negative <input type="checkbox"/> HIV Positive <input type="checkbox"/></p> <p>(Test results must be attached.)</p>  |  | <p><b>Sickle Cell:</b> Negative <input type="checkbox"/></p> <p>Carrier <input type="checkbox"/> Anemia <input type="checkbox"/></p>       |   |  |
|  |  | <p><b>STD Tests:</b> Negative <input type="checkbox"/> Positive <input type="checkbox"/></p> <p>(Test results must be attached.)</p>       |   |  |
| <p><b>Abstinence:</b> 1 Year of abstinence from all sexual relations is required before matching.</p> <p style="text-align: center;"><b>Have you been abstinent for 1 year?</b> Yes <input type="checkbox"/> No <input type="checkbox"/></p>   |  |  |   |  |

# European Matching Application (First Generation)

## Personal Information on Matching Candidate

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

Nationality: \_\_\_\_\_

Visa situation, if applicable: \_\_\_\_\_

Current occupation, mission or study: \_\_\_\_\_

Living situation: Own your own home? Yes  No

Do you Rent? Yes  No  Other: \_\_\_\_\_

I still live with my parents in their own home. \_\_\_\_\_

Education Highest level completed: \_\_\_\_\_

Degree and/or Specialization: \_\_\_\_\_

Date and Place you joined Unification Church:

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Name of your Spiritual Parent or Advocate: \_\_\_\_\_

Years you have been an active participating member: \_\_\_\_\_

Church Activities and Responsibilities:

List the activities you have been involved in and length of time (for e.g.: Sunday Service, D.P. Workshops, Service projects, etc.):

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

Donation History: Tithing  Regular giving

Describe: \_\_\_\_\_

\_\_\_\_\_

Hobbies: \_\_\_\_\_

Skills & Talents: \_\_\_\_\_

Native Language Spoken: \_\_\_\_\_

Any 2<sup>nd</sup> or 3<sup>rd</sup> languages: \_\_\_\_\_

Proficiency: ( ) a Little ( ) Daily conversation ( ) Fluent

**Amnesty Ceremony:** Did you attend the Amnesty and Forgiveness Ceremony held by Dae Mo Nim and Heung Jin Nim in 2007 in Europe? Yes  No

Which city: \_\_\_\_\_

Country: \_\_\_\_\_

Date: \_\_\_\_\_

Interview & Confession Form completed? Yes  No

Comments, remarks, or explanation of special situations:  
(Continue on the back if necessary.)

### Pledge of Faith:

I agree with the ideology of the Family Federation for World Peace and Unification to establish a world of peace through the ideal of true families. I certify the above to be true, and pledge to follow all the preparations, ceremonies and directions of the Blessing process.

Date: \_\_\_\_\_

Printed Name & Signature of Matching Applicant:

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

Printed Name & Signature of Local FFWPU Leader:

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

Printed Name & Signature of National Leader &/or BFD Representative:

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

# European Matching Application (First Generation)

## Health Codes

|    |  |
|----|--|
| 11 | Outward Deformity  |
| 12 | Deaf-Mute  |
| 13 | Serious Burn   |
| 14 | Reproductive Organs Defective  |
| 15 | Infertility  |
| 16 | Internal Organs Sticking Out   |
| 19 | Other Physical Deformity   |
| 21 | AIDS   |
| 22 | Syphilis   |
| 23 | Gonorrhoea   |
| 29 | Other Sexually Transmitted Disease   |
| 31 | Epilepsy   |
| 32 | Schizophrenia  |
| 33 | bi-Polar, Manic depression, Psychosis  |
| 34 | Psychosomatic Disorder   |
| 35 | Spiritually Open Person  |
| 36 | Stammering (Stuttering)  |
| 39 | Other Mental Illness   |
| 41 | Heart Disease  |
| 42 | Collagen Disease   |
| 43 | Blood Disorder   |
| 44 | Stomach Disorder   |
| 45 | Liver Disorder   |
| 46 | Malignant Tumour   |
| 47 | Other Respiratory Problems (eg: Pulmonary Tuberculosis)                                |
| 49 | Other Internal Disease   |
| 51 | Rheumatism   |
| 52 | Myasthenia   |
| 53 | Muscular Dystrophy   |
| 59 | Other Orthopaedic Surgery  |
| 61 | Infectious Skin Disease  |
| 68 | Sickle Cell Anaemia  |
| 69 | Other Skin Disease   |
| 71 | Short Sightedness  |
| 72 | Weak Sight   |
| 73 | Colour Blindness   |
| 74 | Hardness of Hearing  |
| 79 | Other Ophthalmology and Otorhinolaryngology (ear, nose, throat) Problems               |
| 81 | Hypertension   |
| 82 | Diabetes   |
| 83 | Gastric Ulcer  |
| 91 | Other Serious Illness  |
| 92 | Compulsive Habit or Bad Nature (gambling, criminality)                                 |
| 99 | Other Serious Issues (eg: homosexuality, drug abuse, physical abuse and violence, etc) |

## Education Code Table

|    |                                     |
|----|-------------------------------------|
| 10 | Doctor Degree                       |
| 11 | Doctor Candidate                    |
| 12 | Doctor Degree not completed         |
| 20 | Master Degree                       |
| 21 | Master Degree Candidate             |
| 22 | Master Degree not completed         |
| 30 | Bachelor Degree                     |
| 31 | Under Graduate Student              |
| 32 | Under Graduate Course not completed |
| 40 | Junior College Graduate             |
| 41 | Junior College Student              |
| 42 | Junior College not completed        |
| 50 | High School Graduate                |
| 51 | High School Student                 |
| 52 | High School not completed           |
| 60 | Middle School Graduate              |
| 61 | Middle School Student               |
| 62 | Middle School not completed         |
| 70 | Primary School Graduate             |
| 71 | Primary School Student              |
| 72 | Primary School not completed        |
| 99 | No Formal Education                 |