



“ARMY WIVES OF ALASKA APPLICATION”

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ AGE: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOMETOWN: _____ GENDER (PLEASE CIRCLE): MALE / FEMALE

CELL PHONE: _____ HOME PHONE: _____

WORK PHONE: _____ EMAIL: _____

PERSONAL/SOCIAL WEBSITES (Facebook, MySpace, Twitter, etc.): _____

SPOUSE'S NAME: _____ AGE: _____

SPOUSE'S RANK AND UNIT/POSITION IN THE ARMY: _____

SPOUSE'S LENGTH OF SERVICE: _____

WHERE IS YOUR SPOUSE STATIONED? _____

QUESTIONNAIRE

1. HOW LONG HAVE YOU BEEN MARRIED? _____

2. HOW LONG HAVE YOU BEEN A MILITARY SPOUSE? _____

3. WHO ARE YOUR CLOSEST NEARBY RELATIVES? _____

4. DO YOU HAVE CHILDREN? IF SO, HOW MANY AND AGES? _____

5. ARE YOUR CHILDREN ENROLLED IN SCHOOL, AND IF SO, WHAT GRADES AND WHERE? OR DO YOU HOMESCHOOL? IF SO, WE'D LOVE TO HEAR WHY AND HOW YOU APPROACH IT (WITH OTHER MOMS, LOCAL GROUP, OR ON YOUR OWN). _____

6. WAS HE/SHE IN THE MILITARY WHEN YOU MET? IF SO, WHAT DID THAT MEAN TO YOU AND YOUR RELATIONSHIP? IF NOT, WERE YOU NERVOUS/EXCITED ABOUT DATING/MARRYING SOMEONE IN THE MILITARY? WHY? _____

7. DID HE/SHE JOIN AFTER YOU MET? HOW DID YOU FEEL ABOUT IT AND WHAT KIND OF IMPACT DID YOU THINK IT WOULD HAVE ON YOUR RELATIONSHIP? _____

8. HOW DID YOUR SPOUSE PROPOSE? _____

9. DID YOU HAVE A MILITARY WEDDING? IF SO, DESCRIBE. IF NOT, DESCRIBE YOUR WEDDING. _____

10. DO YOU COME FROM A MILITARY FAMILY? IF SO, HOW DID THAT INFLUENCE YOU MARRYING A SOLDIER? IF NOT, WHAT DID YOU THINK ABOUT MARRYING SOMEONE IN THE MILITARY? _____

11. DESCRIBE WHAT LIFE HAS BEEN LIKE AS A MILITARY SPOUSE. WHAT ARE THE: UPS, DOWNS, ADVENTURES, CHALLENGES, BEST PART, TOUGHEST PART, ETC. _____

12. HOW LONG HAVE YOU BEEN STATIONED IN ALASKA? _____

13. DO YOU LIVE ON OR OFF THE BASE, IF SO OR NOT WHY? _____

14. DESCRIBE LIFE IN ALASKA... _____

15. HOW DO YOUR KIDS FEEL ABOUT LIVING IN ALASKA? _____

16. WHAT ROLE DO OTHER MILITARY SPOUSES PLAY IN YOUR EVERYDAY LIFE? _____

17. DESCRIBE THE MILITARY WIFE/SPOUSE "SISTERHOOD" AND "BOND." HOW IMPORTANT IS IT? _____

18. ARE THERE ANY UNWRITTEN "RULES" OF BEING A MILITARY SPOUSE? _____

19. HOW DO YOU AND YOUR FRIENDS HELP EACH OTHER? HOW IMPORTANT ARE FRIENDS WHEN YOU ARE A MILITARY SPOUSE? _____

20. IS YOUR SPOUSE DEPLOYED? WHEN WILL HE/SHE RETURN? IF NOT, HAS HE/SHE BEEN, AND IF SO FOR HOW LONG? OR IS HE/SHE ABOUT TO BE DEPLOYED? _____

21. WHAT ARE YOUR FEELINGS ABOUT DEPLOYMENT? DESCRIBE THE IMPACT ON YOURSELF, YOUR FAMILY AND YOUR FRIENDS AND COMMUNITY? _____

22. WHAT'S THE TOUGHEST PART OF DEPLOYMENT? _____

23. HOW DO YOU STAY IN TOUCH WITH YOUR SPOUSE DURING DEPLOYMENT? _____

24. DOES YOUR FAMILY HAVE ANY SPECIAL TRADITIONS OR THINGS THEY DO BEFORE OR DURING DEPLOYMENT? _____

25. WHAT'S THE BEST ADVICE YOU CAN GIVE A NEW MILITARY SPOUSE? BEST ADVICE YOU CAN GIVE SOMEONE WHOSE SPOUSE IS ABOUT TO BE DEPLOYED? ABOUT TO COME HOME? _____

26. WHAT'S THE BEST PART ABOUT YOUR SPOUSE REDEPLOYING (COMING HOME)? WHAT'S THE MOST CHALLENGING? _____

27. HOW WOULD YOU DESCRIBE YOURSELF? _____

28. WHAT ARE YOUR BEST AND WORST QUALITY? _____

29. HOW WOULD YOUR FRIENDS DESCRIBE YOU? _____

30. WHO IS YOUR BEST FRIEND? SOMEONE ON POST OR BACK HOME? _____

31. DO YOU HAVE ANY FRIENDS THAT ARE APPLYING FOR THIS SHOW? IF SO, PLEASE LIST THEIR NAMES:

32. PLEASE NAME YOUR CLOSEST ARMY FRIENDS IN ALASKA? _____

33. WOULD YOU DESCRIBE YOURSELF AS A WORKING/CAREER MOM/DAD? STAY-AT-HOME MOM/DAD? HOW DID YOU MAKE THAT CHOICE? _____

34. DO YOU HAVE ANY OUTSIDE HOBBIES/PASSIONS THAT YOU PURSUE WITH YOUR SPOUSE AND/OR FAMILY? ANY THAT YOU DO ON YOUR OWN? ANYTHING COMPETITIVE OR PROFESSIONAL (I.E. SPORTS, BALLROOM DANCING, ART, ETC.) _____

35. WHAT DOES YOUR FAMILY DO FOR LEISURE TIME? DO YOU TAKE VACATIONS? IF SO, WHERE AND WHEN WAS YOUR LAST ONE? _____

36. HOW WELL DO NON-MILITARY/CIVILIAN SPOUSES/FAMILIES "UNDERSTAND" OR "GET" YOU AND YOUR LIFESTYLE? _____

37. WHAT IS THE BIGGEST MISCONCEPTION YOU THINK MOST AMERICANS HAVE ABOUT MILITARY FAMILIES AND SPOUSES? _____

38. WHAT DO YOU WISH YOU COULD SHARE WITH MOST AMERICANS TO HELP THEM UNDERSTAND THE LIVES YOU LEAD? _____

39. WHAT ROLE DOES YOUR FAMILY BACK HOME PLAY IN YOUR LIFE? HOW OFTEN DO YOU SEE THEM?

40. WHAT ROLE DOES THE ANCHORAGE/FAIRBANKS COMMUNITY PLAY IN YOUR LIFE? ARE THEY SUPPORTIVE? WOULD YOU LIKE TO BE MORE/LESS INVOLVED WITH THE LOCAL COMMUNITY? _____

41. HOW DO YOUR KIDS FEEL ABOUT BEING MILITARY KIDS? MANY MILITARY KIDS ARE OUTGOING, INDEPENDENT, CONFIDENT, CURIOUS. DESCRIBE YOUR KIDS... _____

42. HOW DO YOU DESCRIBE THE ROLE YOU PLAY AS A MILITARY SPOUSE AND PARENT TO YOUR KIDS? WHAT'S YOUR PHILOSOPHY OF BEING A MILITARY SPOUSE? _____

43. DO YOU WATCH "ARMY WIVES"? WHAT DO YOU THINK OF IT? _____

44. IS YOUR SPOUSE "CAREER" MILITARY (20 YEARS OR MORE)? IF SO, DO YOU HAVE DREAMS/GOALS FOR YOU AND YOUR FAMILY AS YOU EMBARK ON THE ADVENTURE TOGETHER? _____

45. IF YOUR SPOUSE IS NOT "CAREER" MILITARY, WHEN WOULD HE/SHE BE LEAVING, AND WHAT DO YOU THINK HE/SHE WILL DO AFTER LEAVING THE MILITARY? DO YOU HAVE SPECIFIC DREAMS/GOALS FOR YOU AND YOUR FAMILY AFTER THE MILITARY? _____

46. WHAT WOULD WE SEE IF WE FOLLOWED YOU FOR 6-8 WEEKS THIS SPRING? WHAT IS A TYPICAL DAY LIKE? TYPICAL WEEK? ANY BIG FAMILY MILESTONES COMING UP THAT YOU ARE EXCITED ABOUT? IF YOUR SPOUSE IS DEPLOYED, HOW ARE YOU PLANNING TO CELEBRATE/MANAGE THOSE EVENTS WITH HIM/HER AWAY? _____

47. IF YOU COULD CHANGE ONE THING ABOUT YOUR LIFE, WHAT WOULD IT BE? _____

48. IF YOU COULD CHANGE ONE THING ABOUT HOW THE AMERICAN PUBLIC SEES YOU, WHAT WOULD IT BE? _____

49. WHY ARE YOU INTERESTED IN DOING THIS SHOW? WHY DO YOU THINK MILITARY SPOUSES' STORIES SHOULD BE TOLD? _____

PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS COMPLETELY

1A. ARE YOU A LAWFUL RESIDENT OF THE UNITED STATES? YES / NO

2B. HAVE YOU EVER BEEN ON TELEVISION BEFORE? YES / NO IF YES, PLEASE EXPLAIN: _____

3C. HAVE YOU EVER HIT ANYONE IN ANGER OR SELF-DEFENSE? YES / NO (CIRCLE ONE) IF SO, PLEASE EXPLAIN: _____

4D. HAVE YOU EVER BEEN ARRESTED OR HAD A RESTRAINING ORDER PLACED AGAINST YOU? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

5E. HAVE YOU EVER BEEN TREATED FOR ANY SERIOUS PHYSICAL ILLNESS OR ANY MENTAL ILLNESS (ES) OR HAD ANY SERIOUS INJURIES? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

6F. DO YOU REGULARLY TAKE ANY PRESCRIPTION MEDICATION? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

7G. DO YOU HAVE ANY ALLERGIES? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

8H. DO YOU HAVE ANY PHYSICAL CONDITIONS, SPECIAL NEEDS, OR FEARS THAT WOULD AFFECT YOUR ABILITY TO PARTICIPATE IN THE SHOW? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

9I. HAVE YOU EVER BEEN CHARGED WITH A VIOLENT OFFENSE OR A FELONY? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

10J. HAVE YOU EVER BEEN CONVICTED OF A VIOLENT OFFENSE OR A FELONY? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

11K. HAVE YOU EVER BEEN PARTY TO A LAWSUIT? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

12L. HAVE YOU EVER BEEN ARRESTED FOR DUI/DWI? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

13M. HAVE YOU EVER BEEN CONVICTED OF DUI/DWI? YES / NO (CIRCLE ONE) IF SO, EXPLAIN: _____

By signing this questionnaire, I represent and warrant that all of the information in this questionnaire is true and accurate.

Print Name: _____

Signature: _____

Date: _____