

Names

What is your name?

What is your surname / last name?

Do you have a **nickname**?

Work & Occupation

What do you do?

Where do you work?

Do you like your job?

Why do you like your job?

I like my job because _____.

Marital Status

Are you married / single?

Do you have a boyfriend / girlfriend?

What is your partner's name?

Family

Do you have any children?

What are their names?

How many brothers and sister do you have?

Age

How old are you?

When is your birthday?

Where were you born?

Contact Information

Where are you from?

What is your address?

What is your phone number?

What is your cell phone number?

Do you live with your parents?

Do you live alone?

Who do you live with?

Do you live in a house or an apartment?

What is your e-mail address?

Free time activities

What do you do in your free time?

What are your hobbies?

What type of music do you like?

Do you have a favourite singer or group?

What types of movies do you like?

Do you like to read?

What do you like to read?

Habits

Do you have any bad habits?

Yes, one of my bad habits is _____.

Do you snore?

Do you smoke?

How many cigarettes do you smoke a day?