

ORDER OF CHIRSTIAN INITIATION FOR ADULTS

APPLICATION FORM

	Today's date:		
Name:	Middle name:	Last Name(s)	
Maiden Name (if applicable):			
Date of Birth:	Age:		
Place of Birth:		tc), region (sate, province, territory, etc), and country)	
Name of Father:			
Name of Mother:			

I. CONTACT INFORMATION

Full Mailing Address:		
Phone: (Daytime)	Phone (Evening/weekend)	
Cell:	Occupation:	
Email: (Personal)	(Other):	

II. RELIGIOUS HISTORY

1.	1. What, if any, is your present religious affiliation?					
2.	Have you ever been baptized? Yes No I am not sure					
	If you answered "yes" to question number 2, please provide the following information and a <u>copy of the certificate</u> : (a) In what denomination were you baptized?					
	(b) Date of your approximate age when you were baptized:					
	(c) Baptismal Name (If different form your current name):					
	(d) Place of Baptism (Name of Church/denomination):					
	(e) Address (If known):					
3.	If you were baptized as a Catholic, check those sacraments you have already received and provide a copy of the <u>certificate(s):</u>					

Penance (Confession) _____ Eucharist (First Communion) _____ Confirmation _____

III. CURRENT MARITAL STATUS

	Check the appropriate statements (s) below and provide ay information requested beneath each statement:			
1.	I have never married			
2.	I am engaged to be married			
	(a) Your fiancé's name			
	(b) Your fiancés current Religious Affiliation (if any)			
	(c) For you: This is my first marriage have been married before			
	(d) For your fiancé : This is my first marriage My fiancé has been married before			
3.	I am married			
	(a) Your spouse's name			
	(b) Your spouse's current Religious Affiliation (if any)			
	(c) For you: This is my first marriage have been married before			
	(d) For your spouse: This is my spouse's first marriage My spouse has been married before			
	(e) Date of marriage			
	(f) Location of marriage			
	(Include locality (town, city, county, etc), region (sate, province, territory, etc), and country)			
	(g) Officiating authority of marriage			
4.	I am married but separated from my spouse			
5.	I am divorced I am divorced and I have not remarried			
6.	6. I am a widow (widower) I have not remarried since my spouse's death			
7.	Are you living with a significant other? Yes No Do you have a child(ren) with this person Yes No			

List any name of children or other dependents (e.g. Daughter - Jane, Stepson - John)

IV. FAMILY INFORMATION

Relationship:	Name:	Age:
Relationship:	Name:	Age:

V. General Questions

1. What or who has led you to want to know more about the Catholic Faith?

2. Please describe the types of religious education you have received as a child and as an adult.

3. What contact have you had with the Catholic Church to date?

4. What are some of the questions or concerns you have about the Catholic Church?

5. At this point in time, which of the following statements best describes your present feelings and thoughts about joining the Catholic Church? (Please circle one)

A. I need much more information about the Catholic Church before I would consider joining.

- B. I am considering joining, but I am still unsure about it.
- C. I am fairly sure that I would like to join, but still need sometime to study and pray about it.
- D. I am fairly sure that I want to join the Catholic Church.

Please contact St. Agnes Catholic Church Religious Education Office to arrange an Inquiry Appointment

2314 Third Avenue, Scottsbluff, NE 69361

Terri Calvert at 308-635-1362 or dre@st-agnes-church.com