

# Saint John/Sacred Heart Parishes

## Order of Christian Initiation of Adults

### Inquirer/Candidate Information 2024 - 2025

PLEASE PRINT.

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN)

ADDRESS: \_\_\_\_\_  
(STREET)

PHONES: \_\_\_\_\_  
(CITY) (STATE) (ZIP)  
(HOME) (WORK) (CELL)

EMAIL ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ PLACE OF EMPLOYMENT: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
(CITY AND STATE)

### RELIGIOUS HISTORY

What, if any, is your present religious affiliation? \_\_\_\_\_

Have you been baptized? Yes  No

In what denomination were you baptized? \_\_\_\_\_

Place of baptism \_\_\_\_\_

Address \_\_\_\_\_

Date of baptism \_\_\_\_\_

**If you were baptized as a Roman Catholic, please complete the following:**

BAPTISM: \_\_\_\_\_  
(NAME OF CHURCH) (CITY, STATE) (DATE)

EUCCHARIST: \_\_\_\_\_  
(NAME OF CHURCH) (CITY, STATE) (DATE)

CONFIRMATION: \_\_\_\_\_  
(NAME OF CHURCH) (CITY, STATE) (DATE)

MATRIMONY: \_\_\_\_\_  
(NAME OF CHURCH) (CITY, STATE) (DATE)

### MARITAL STATUS

**Please check those that apply:**

\_\_\_\_ I am not married.

\_\_\_\_ I am presently separated from my spouse.

\_\_\_\_ I have never been married.

\_\_\_\_ I am divorced but have not remarried.

\_\_\_\_ I am engaged to be married.

\_\_\_\_ I am divorced and have remarried.

\_\_\_\_ I am married.

\_\_\_\_ I wish to apply for an annulment.

\_\_\_\_ I have been married only once.

\_\_\_\_ My spouse needs to apply for an annulment.

\_\_\_\_ I was married in the Catholic Church.

\_\_\_\_ I have applied for an annulment.

\_\_\_\_ I have been married before.

\_\_\_\_ I have received an annulment.

\_\_\_\_ My spouse was married before.

\_\_\_\_ I wish to speak with a priest or deacon.

Other information concerning my marital status (optional): \_\_\_\_\_

**FAMILY INFORMATION**

SPOUSE/FIANCE NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN)

SPOUSE/FIANCE RELIGION: \_\_\_\_\_

DOES YOUR SPOUSE/FIANCE INTEND TO SPONSOR YOU THROUGH THE RCIA PROCESS? Yes  No

LIST THE NAMES OF ANY CHILDREN OR DEPENDENTS AND THEIR AGES.

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

YOUR FATHER'S FULL NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

YOUR FATHER'S RELIGION: \_\_\_\_\_

YOUR MOTHER'S FULL NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN NAME IS REQUIRED.)

YOUR MOTHER'S RELIGION: \_\_\_\_\_

**GENERAL INFORMATION**

What or who has brought you to know more about the Roman Catholic faith? \_\_\_\_\_

Please describe the type of religious education you received as a child or as an adult: \_\_\_\_\_

What contact have you had with the Roman Catholic Church to date? \_\_\_\_\_

What are some of the questions or concerns you have about the Roman Catholic Church? \_\_\_\_\_

**ADMINISTRATIVE USE ONLY**

Confirmation name: \_\_\_\_\_

CATECHUMEN     CANDIDATE FOR FULL COMMUNION     CATHOLIC NEEDING EUCHARIST AND/OR CONFIRMATION

Sponsor's name: \_\_\_\_\_

Sponsor's parish name and address: \_\_\_\_\_

Is the baptismal certificate on file? Yes  No

Pre-catechumenate Interview: \_\_\_\_\_

Interviewer and Date

Pre-enrollment Interview: \_\_\_\_\_

Interviewer and Date