Appendix H – OCIA Candidate's Information Form

(Diocesan Policy Art. 1020, §7)

Please give the following information about yourself.

1. Your full name						
-	Last Name,	First		Middle	•	Maiden
2. Complete address						
3. City, State, Zip Code						
4. Phone number	Home W	ork Cellular	Email			
5. Place of work			Occupatio	n		
6. Father's full name						
	Last Name, 6a. He is	First Natural or	Adoptive and	Middle Living or		
7. Mother's full name						
	Last Name, 7a. She is	First Natural or	Adoptive and	Middle Living or		Maiden
8. Your city, state of birth					Date of Birth	

9. Your baptismal status & church affiliation(s):

Date Baptized/Joined	Name of Church & Denomination	City, State

10. Your Baptism(s) (Please check all that are true):

I have been baptized in the name of the Jesus only.

I have been baptized in "The Name of the Father and of the Son and of the Holy Spirit (Ghost)". My Trinitarian Baptism(s) was (were): by immersion by pouring by sprinkling I have been baptized as a Roman Catholic.

Do Not Write Here – MARRIAGE AND INITIATION NEEDS ASSESSMENT – For Parish Use Only					
Annulment from Tribunal	Baptism				
In-parish marriage case	First Reconciliation				
Convalidation	Reception into Full Communion				
Sanation of marriage	Confirmation Can only be Confirmed by Bishop				
Nothing; marriage presumed valid	First Eucharist				

11. Your Marriage Status (Please check all that are true):

I have never married.	I am living with someone
I have been married but I am a widow(er), separated and/or divorced	I have plans to marry someone
I am presently married	I do not presently have plans to marry

12. If you were ever married, please identify all your spouses (including your present one), dates and locations of marriages and dates of divorce or death if applicable. Not Applicable.

Full (Maiden) Name of Spouse(s)	Date of Marriage	Church/Other	Date Ended	Death/Divorce

12a. Were any of your spouses listed above married to someone else before marriage to	Yes	No
you?		
If any were previously married, place an asterisk (*) to left of his/her name(s).		
12b. Were any of your spouses listed above Catholics?	Yes	No
5 5 1	res	INO
If any were catholic, place a cross $(+)$ to the left of his/her name(s).		
Notes:		

ast Name	First		Middle		Maiden	
Home V	Work Cellula	Email				
		Occup	ation			
ame _						
	Last Name, 17a. He is			Living or	Deceased	
name						
	Last Name, 7a. She is	^{First} Natural or	Middle Adoptive and	Living or	Maiden Deceased	
oirth _				Date of Birt	th	
	Home Mame	Home Work Cellular ame 17a. He is name Ta. She is	Email Home Work Cellular Occup ame Last Name, First 17a. He is Natural or name Last Name, First 7a. She is Natural or	Email Home Work Cellular Occupation Ame Last Name, First Middle 17a. He is Natural or Adoptive and name Last Name, First Middle 7a. She is Natural or Adoptive and	Email Home Work Cellular Occupation Ame Last Name, First Middle 17a. He is Natural or Adoptive and Living or hame Last Name, First Middle 7a. She is Natural or Adoptive and Living or	Email Home Work Cellular Occupation ame Last Name, First Middle 17a. He is Natural or Adoptive and Living or Deceased name Last Name, First Middle Adoptive and Living or Deceased name Last Name, First Middle Maiden 7a. She is Natural or Adoptive and Living or Deceased

About your intended or present spouse or not applicable. Is s/he also joining the Catholic Church now Yes, please see his/her information on his/her form. No or Maybe complete below:

20. His/Her baptismal status & church affiliation(s):

Date Baptized/Joined	Name of Church & Denomination	City, State

21. His/Her Baptism(s) (Please check all that are true):

S/he has been baptized in the name of the Jesus only.	S/he has been baptized as a Catholic.				
S/he has been baptized in Trinity. My Trinitarian Baptism(s) was (were): jo by immersion by pouring by sprinkling	S/he left the Roman Catholic Church by a formal act t join another church: Date of departure//				
22. His/Her Marriage Status (Please check all that are tr	ue):				
S/he has never married.	S/he is living with me				
S/he has married but s/he is a widow(er), separated and/or divorced	S/he has plans to marry me				

S/he is presently married to me

23. If s/he were ever married before, please identify all of his/her previous spouses (except yourself), dates and locations of marriages and dates of divorce or death. Not Applicable

Full (Maiden) Name of Spouse(s)	Date of Marriage	Church/Other	Date Ended	Death/Divorce

23a. Were any of his/her spouses listed above married to someone else before marriage to your intended spouse? Yes No

If any were previously married, place an asterisk (*) to left of his/her name(s).

23b. Were any of his/her spouses Catholics? Yes No If any were catholic, place a cross (+) to the left of his/her name(s).

Notes:

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24. Please list the names of your family (sons, daughters, parents or others) living in your household:

Full Name	Age	Relationship to you	Religion

25. Who will be your sponsor for the sacraments of initiation?

(A sponsor is a practicing Catholic who has been confirmed, and is able and does receive the Eucharist regularly.)

His/Her full name						
	Last Name,	First		Middle	Maiden	
Complete address						
City, State, Zip Code						
(Area Code) Phone number			Email			
	Home W	ork Cellular			Upda	ted 7/10/23