

Please Print

OFFICE FOR THE DIACONATE
Inquirer's Information Form

This is not an Application Form

Date: _____

Please answer All Questions

Name: Last _____ First _____ Middle _____

Home Address: _____

City _____ State _____ Zip _____

Phones: Home _____ Work _____ Cell _____

Date of Birth: _____ Email: _____

Parish: _____ Location: _____

Marital Status: Single Married Divorced Widowed Other _____

If married, date of Church Wedding: _____ Wife's Name: _____

Are you single or widowed? Yes No If so, are you open to embracing celibacy? Yes No

Have you or your wife *ever* been divorced? Yes No Has that marriage been annulled? Yes No

Ages of children: _____ Ages of Children & Dependents *at Home*: _____

Are you a U.S. citizen? Yes No Or a permanent resident (green card holder)? Yes No

In what country were you born? _____ How long have you lived in the USA? _____

Were you baptized as a Catholic? Yes No Have you been confirmed as a Catholic? Yes No

What date, and at what church were you baptized? _____

What date, and at what church were you confirmed? _____

Are you a practicing Catholic? Yes No Are you active in parish ministries? Yes No

In any of these ministries? Reader Extraordinary Minister of Holy Communion Sacristan RCIA

Catholic School Faculty Sacramental Preparation Catechesis Choir *Instruments:* _____

In what charitable ministries have you participated? _____

Are you in good health? Yes No If *no*, please explain: _____

Highest level of education attained: _____

Are you currently employed? Yes No Employer: _____

Occupation and duties: _____

Are you proficient at speaking & writing English, and ready for college studies in English? Yes No

Do you speak or write in languages other than English? Yes No What languages? _____

Are you willing to undergo a complete battery of psychological, STD, & drug tests? Yes No

Are you willing to have any annulment records reviewed as part of an application process? Yes No

Are you willing to undergo a criminal background check? Yes No

I have previously submitted an inquiry or application for Deacon Formation. Where? _____

Please Check One:

I believe I am ready to apply for the Deacon Formation Program. My wife agrees: Yes No

I am interested in learning more about the program, but not sure if I am ready to apply.

Please return this document to: HuberC@adw.org or mail to:

Office of Diaconate Formation, Archdiocese of Washington, P.O. Box 29260 Washington, DC 20017-0260