

Rite of Christian Initiation of Adults **PreCatechumenate Questionaire**

Parish Parish Minister Priest/Deacon			City				
			Date				
Name							
Address				Apt. No.			
	City		County		State	Zip	
Home Phone			Cell Phone				
Email				Work Phone			
Date of Birth			Place of Birth				
Father's Name			Religion				
Mother's Maiden Name			Religion				
Concerning Yourself	f:						
Occupation	eupation Works			place			
Present Marital Status	s:	Married	Single	Engaged*	Separated	Divorced	
*If Engaged: Planned date for wedding							
This form is for use early in the period of Evangelization and Precatechumenate and is designed to assist the parish minister, priest or deacon in determining the validity of a prior baptism, level of previous religious catechesis and canonical status of current marriage. Inquirer should be interviewed separately.							

Have you ever been married in chu	rch, civilly, or in comm	non law?	Yes*	☐ No
*List marriages, including present l	Marriage:			
Name of Spouse:		Place o	of Marriage:	
A. Please include Maiden Name				
В.				
C.				
Data of Manniago		Data and Have	y Manniaga I	Indod.
Date of Marriage: (Month/Day/Year)		Date and How (Death/D	v Iviarriage r ivorce/Annulmen	
A.				
В.				
C.				
CI II I				
Children Name	Date of Birth:	Religion		
Name	Date of Birtin.	Religion		
* If married or engaged:				
Name of Spouse or Fiancé				
Religion				
Religion				
Has your spouse or fiancé been pre	viously married?	Yes	☐ No	
Name of Spouse:		Place o	of Marriage:	
A. Please include Maiden Name				
B.				
C.				
C.				
D-46W		D-4 J.H	M	S. J. J.
Date of Marriage: (Month/Day/Year)		Date and How (Death/D	v Iviarriage r ivorce/Annulmen	
A.				
B.				
C				
C.				

Have you ever been baptized, christened, or sprinkled in any religion? Yes* No					
*If you were baptized:					
Date: (Month/Date/Year)					
Name of Church:					
City:	State:	Zip:			
What denomination?		-			
Minister who baptized:					
Sponsors at Baptism:					
If you were not baptized, how do you know that?					
Have you over been confirmed?		Yes*	□No		
Have you ever been confirmed?					
*If you were confirmed					
Date: (Month/Date/Year)					
Name of Church:					
City:	State:	Zip:			
Minister:		-			
Sponsor:					
Names of Churches you have attended:					
Describe very religious or Condex Cabe at training					
Describe your religious or Sunday School training:					
What is your present religious affiliation?					
What is your present rengious armation.					
What Church do you presently attend?					
City:					