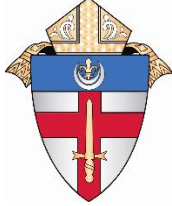


**THE ROMAN CATHOLIC  
DIOCESE OF COVINGTON**

**APPLICATION FOR:**  
Sponsorship in a Seminary Program



Please attach  
**Passport-size  
Photograph**  
here

**DATE** \_\_\_\_\_

*Please type or print clearly all information*

**GENERAL INFORMATION**

**Name** \_\_\_\_\_  
First Middle Last

**Home Address** \_\_\_\_\_  
Number Street Apt. #

\_\_\_\_\_ City State Zip Code

**How long have you lived at the above address?** \_\_\_\_\_

**Mailing Address** *(if different from one above)*

\_\_\_\_\_ Number Street Apt. #

\_\_\_\_\_ City State Zip Code

**Telephone Numbers & E-mail address** *((please include area codes for phone numbers))*

Home \_\_\_\_\_ Cellphone \_\_\_\_\_ E-mail \_\_\_\_\_

**Age** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Place of Birth** \_\_\_\_\_

**S.S.#** \_\_\_\_\_ **D.L. #** \_\_\_\_\_

**Home Parish** \_\_\_\_\_ **Pastor** \_\_\_\_\_

**Address** \_\_\_\_\_

*Your Pastor will be sent a form from the Diocese asking for his insights.*

# Part 1: Personal Information

## Section 1: Catholic /Religious Background

### A. Sacraments of Initiation *(Include a recent baptismal certificate)*

Date of Baptism \_\_\_\_\_ Church \_\_\_\_\_

Date of First Communion \_\_\_\_\_ Church \_\_\_\_\_

Date of Confirmation \_\_\_\_\_ Church \_\_\_\_\_

List parishes in which you haven been involved since age 14 \_\_\_\_\_

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### B. Parents' Marriage

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

If either parent or any relative is a member of an Eastern Rite of the Catholic Church,  
please give details \_\_\_\_\_

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### C. Sacramental and Religious Practice

How frequently do you participate in the Holy Eucharist?

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Do your parents practice their faith regularly? \_\_\_\_\_

Describe how you pray, \_\_\_\_\_

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List the ways that you have been involved in your parish (*for example, as a server, reader, choir member, extraordinary minister of the Eucharist, youth group member, Christian Service, Parish Council, etc*)

Please be specific. \_\_\_\_\_

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Do you currently have a spiritual director, or someone with whom you regularly discuss your spiritual growth and vocational choice? \_\_\_\_\_

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Do you have a regular confessor? \_\_\_\_\_

Do you have any relatives who are in the Priesthood or Religious Life? Please specify. Have any of them influenced your decision or directly invited you to consider priestly service?

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#### **D. Religious History**

Are you a convert to Catholicism? \_\_\_\_\_

If yes, please give date of reception into the Catholic Church. \_\_\_\_\_

Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Former Denomination/Religion \_\_\_\_\_

Years of Affiliation \_\_\_\_\_

Reason for Conversion \_\_\_\_\_

If you have always been Catholic, have you ever been away from the Church for a period of time? \_\_\_\_\_

If yes, please describe the situation in detail. \_\_\_\_\_

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**E. Previous experience in Religious Life**

List any diocese in which you have resided for more than six months since age 14.  
(include residence at school/college/seminary outside your home diocese)

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If you have ever **applied** to a diocese or religious community and were not accepted as a candidate, please give the name of the diocese or community, pertinent dates, and your understanding of why you were not accepted. \_\_\_\_\_

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If you have ever been **accepted** as a candidate for any other diocese or religious community, Please give the name of the diocese or community, the pertinent dates and your reason for leaving reasons presented to you, and the level you had reached when you left.

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Have you ever bound yourself by any oaths, vows, or promises in any kind of religious organization, secret society or cults? \_\_\_\_\_  
If so, please specify. \_\_\_\_\_

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If you were professed in a Catholic Religious Community:

- a. The date of your vows. \_\_\_\_\_
- b. Were your vows temporary or perpetual? \_\_\_\_\_
- c. Have your vows expired or been dispensed? \_\_\_\_\_

If you were preparing for the Priesthood, were you ever installed as a reader or acolyte? \_\_\_\_\_  
Were you ever ordained? \_\_\_\_\_

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## SECTION II: CANONICAL STATUS

The following are impediments to ordination which require a dispensation.

Please check where applicable to you:

- a. Severe Mental Illness (i.e. have you ever committed yourself or been committed to a psychiatric facility?) Yes\_\_\_No\_\_\_
- b. Apostasy, Heresy or Schism (i.e. have you ever publicly abandoned the Catholic Church; have you ever publicly advocated any views contrary to the teaching of the Catholic Church; have you ever joined another religious body by a formal act?) Yes\_\_\_No\_\_\_
- c. Existing bond (e.g.marriage) Yes\_\_\_No\_\_\_
- d. Private or Public Religious Vows Yes\_\_\_No\_\_\_
- e. Voluntary Homicide or Abortion (have you every been involved in the taking of another human life; have you ever helped someone procure an abortion, performed the abortion or positively cooperated in obtaining an abortion for another person?) Yes\_\_\_No\_\_\_
- f. Attempted suicide, self-mutilation or the mutilation of others? Yes\_\_\_No\_\_\_
- g. Ever impersonated a deacon, priest or bishop? Yes\_\_\_No\_\_\_
- h. Ever been excommunicated? Yes\_\_\_No\_\_\_

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## SECTION III: LEGAL STATUS

Are you a citizen of the United States?\_\_\_\_\_

If not, of what country are you a citizen?\_\_\_\_\_

Do you have a passport?\_\_\_\_\_ Number\_\_\_\_\_ Place of Issue\_\_\_\_\_

Expiration Date\_\_\_\_\_

Immigration Status\_\_\_\_\_

Are you a permanent resident of the United States?\_\_\_\_\_

Have you ever been arrested?\_\_\_\_\_ If so, what were the charges?\_\_\_\_\_

Place and date of arrest (*give city, state, county*)\_\_\_\_\_

Age at time of arrest\_\_\_\_\_ Disposition\_\_\_\_\_

Have you ever been convicted of a felony misdemeanor?(*other than civil infraction such as a traffic offense*)\_\_\_\_\_

# SECTION IV: FAMILY BACKGROUND

## A. Your Parents

**Father**  
Name \_\_\_\_\_  
Birthplace \_\_\_\_\_  
Living \_\_\_\_\_

**Mother**  
Name \_\_\_\_\_  
Birthplace \_\_\_\_\_  
Living \_\_\_\_\_

**Father**  
*If Deceased*  
Cause of Death \_\_\_\_\_  
Age at Death \_\_\_\_\_  
Year of Death \_\_\_\_\_

**Mother**  
*If Deceased*  
Cause of Death \_\_\_\_\_  
Age at Death \_\_\_\_\_  
Year of Death \_\_\_\_\_

*If Alive:*  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone (\_\_\_\_) \_\_\_\_\_

*If Alive*  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone (\_\_\_\_) \_\_\_\_\_

Highest Grade Completed \_\_\_\_\_  
Occupation \_\_\_\_\_  
Religion \_\_\_\_\_  
Convert? \_\_\_ Yes \_\_\_ No \_\_\_

Highest Grade Completed \_\_\_\_\_  
Occupation \_\_\_\_\_  
Religion \_\_\_\_\_  
Convert? \_\_\_ Yes \_\_\_ No \_\_\_

Parents Marital Status \_\_\_\_\_  
If Divorced, has either parent remarried? \_\_\_\_\_  
Stepfather's complete name \_\_\_\_\_  
Stepmother's complete name \_\_\_\_\_

## B. Brothers and Sisters

Name	Age	Occupation	Marital Status	Practicing Catholic?
_____				
_____				
_____				
_____				

Briefly describe your home life as a child. Please describe the quality of all the relationships in your family (e.g. between parents and each child, between children) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Other Items**

Name and address of person(s) to be notified in case of emergency

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Relationship \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Your ethnic background \_\_\_\_\_

**SECTION V: GENERAL MEDICAL INFORMATION**

**A. General Health**

How was your health as a child? \_\_\_\_\_

Did you suffer from any serious illnesses? \_\_\_\_\_

If yes, describe what and when briefly. \_\_\_\_\_

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How was your health as an adolescent? \_\_\_\_\_

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Have you ever had any serious illnesses, accidents, surgeries, handicaps or physical limitation?  
Please describe briefly. \_\_\_\_\_

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Do you have any past medical concerns, e.g. insomnia, weight problems, high blood pressure,  
persistent colds, heart ailments, indigestion, diabetes, asthma, poor appetite, headaches, tiredness,  
allergies, etc? \_\_\_\_\_

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Do you have a history of substance abuse/chemical dependency (drugs, alcohol, etc.) \_\_\_\_\_

If yes, give details. \_\_\_\_\_

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Have you ever been involved in a chemical dependency or substance abuse program? \_\_\_\_\_

If yes, list when and where. \_\_\_\_\_

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Have you ever been in a treatment program for abuse of any kind? \_\_\_\_\_

If yes, list when and where. \_\_\_\_\_

Is there any history in your family of mental illness, alcoholism, drug abuse or sexual abuse? \_\_\_\_\_  
If yes, please give details. \_\_\_\_\_

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Have you ever been the victim of physical or sexual abuse? \_\_\_\_\_  
If yes, please give details. \_\_\_\_\_

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**B. Counseling/Therapy**

List any experience with counseling therapy. \_\_\_\_\_

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**C. Your Physician**

Name of personal Physician \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

*Please note: Applicant must submit (a) Physical Examination Form  
(b) Dental Examination Form*



## SECTION VI: EDUCATION BACKGROUND

**A. Grade Schools** (*List in order the schools you have attended*) Catholic? Yes\_\_\_ No\_\_\_

Name	City/State	Date
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**B. Secondary Schools** (*High schools*) Catholic? Yes\_\_\_ No\_\_\_

Name	City/State	Date
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Date of Graduation\_\_\_\_\_ Grade Average (GPA)\_\_\_\_\_

### C. Catholic Education

If you did not attend Catholic Schools, please indicate the extent of your religious education  
(*e.g. parish, CCD, religious education, school of religion, etc.*)

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### D. Colleges, Universities, Seminaries

School	Location	Dates Attended	Major
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### E. Degrees

Please list degrees earned and details  
(*school, location, major, GPA and honors, if applicable*)\_\_\_\_\_

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**F. Extracurricular Activities; Honors and Awards**

Please list extracurricular activities and organizations in which you are/were involved.

Name of Group	Type of Activity	Positions Held
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**Honors and Awards**


**G. Other Educational Background Information**

Which studies did you like best in high school? In college? \_\_\_\_\_

\_\_\_\_\_

Which did you like least? \_\_\_\_\_

\_\_\_\_\_

If your college major was not philosophy, please indicate any philosophy courses you have taken. \_\_\_\_\_

\_\_\_\_\_

Please indicate any credits you have earned in theology. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any abilities in foreign languages? Please indicate language, years of study and level of competence to read, write and speak. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List class offices held. \_\_\_\_\_

\_\_\_\_\_

In which skills or areas of education do you have special training qualifications? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been dismissed or voluntarily withdrawn from any school? \_\_\_\_\_

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

Would you describe yourself as a poor, average or above average student? \_\_\_\_\_

\_\_\_\_\_

## SECTION VII: EMPLOYMENT/FINANCIAL STATUS

### A. Employment History

List chronologically any paid work (*full or part time*) that you have done.

Give dates, type of work, duration, likes and dislikes about the work, reason for leaving and any other helpful comments (*use separate sheets if needed*). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your current or most recent job

Name of your employer \_\_\_\_\_

Address \_\_\_\_\_

Job Title \_\_\_\_\_ Duration \_\_\_\_\_

Describe your duties in detail. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list the volunteer work you have done, start with what you are currently involved with and work back, please include dates also. \_\_\_\_\_

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**B. Indebtedness**

Are you currently in debt (e.g. with credit cards, bank loans, or personal loans)?

Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, please indicate to whom you are indebted and the amount of debt(s).*

\_\_\_\_\_ - \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

Have you incurred any Government Student Loans? Yes \_\_\_\_\_ No \_\_\_\_\_

*If so, please indicate.*

<b>Bank/Agency Holding Loans</b>	<b>Interest Rate</b>	<b>Years Incurred</b>	<b>Amounts</b>
_____			
_____			
_____			

**SECTION VIII: MILITARY SERVICE**

Have you registered for the Selective Service? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is your classification? \_\_\_\_\_

If no, please explain. \_\_\_\_\_

If you have served in the military

Branch of Service \_\_\_\_\_ Enlistment Date \_\_\_\_\_  
Rank at Discharge \_\_\_\_\_ Discharge Date \_\_\_\_\_  
Type of Discharge \_\_\_\_\_ Combat \_\_\_\_\_  
Service Duties \_\_\_\_\_  
Reserve Status \_\_\_\_\_

If you have been discharged from Military Service, please provide us with a copy of your DD-214.

Are education benefits available to you from the military? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain \_\_\_\_\_

## SECTION IX: PERSONAL DATA

Describe your free time apart from school and/or work.

What are your interests and hobbies? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you like to read? In what particular fields? \_\_\_\_\_

\_\_\_\_\_

Describe the kinds of books you read, give the titles of two or three books you have read recently, and the names of the magazines/periodicals that are part of your regular reading. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any neighborhood, civic, social and service organizations to which you belong and describe your roles in each. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your relationship with your friends: who are they, what do they do together, how long have you been friends, how do you give and receive support? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Who are the most important people in your life? \_\_\_\_\_

\_\_\_\_\_

Have you ever dated?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you currently dating?

Yes \_\_\_\_\_ No \_\_\_\_\_

How old were you when you had your first date? \_\_\_\_\_

Have you ever had a serious relationship?

Yes \_\_\_\_\_ No \_\_\_\_\_

(one in which you were seriously considering marriage)

Have you ever gone steady?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been engaged?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been married? (*In a church, by the state, or by "common law"*) Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please answer the following:

To whom?\_\_\_\_\_

When\_\_\_\_\_Where\_\_\_\_\_

Before whom? (*J.P., Priest, Minister, etc.*)\_\_\_\_\_

Is your former spouse deceased? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, give date of death\_\_\_\_\_

Have you received a civil divorce? Yes\_\_\_\_\_ No\_\_\_\_\_

Grounds\_\_\_\_\_

Have you received a Church annulment? Yes\_\_\_\_\_ No\_\_\_\_\_

*If yes, please specify.*

Diocese\_\_\_\_\_Date of Annulment\_\_\_\_\_Protocol #\_\_\_\_\_

Do you have any children? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, how many and what ages?\_\_\_\_\_

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

Do you have any dependent relatives?\_\_\_\_\_

\_\_\_\_\_

Are you at ease in the presence of others?\_\_\_\_\_

Do you characterize yourself as a person who enjoys helping others?\_\_\_\_\_

State some instances where you feel you have helped others.\_\_\_\_\_

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

What do you regard as your particular talents?\_\_\_\_\_

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

Is there anything else you would like to say about yourself?\_\_\_\_\_

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

## SECTION X: VOCATIONAL DISCERNMENT

How old were you when you first thought of becoming a priest? \_\_\_\_\_

Has it been over a long period of time or just occasionally? \_\_\_\_\_

Discuss your interest in the Priesthood. \_\_\_\_\_

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Who, besides yourself, contributed most to your consideration of the Priesthood. Why? \_\_\_\_\_

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Has anyone suggested that you may have a vocation to the Priesthood? If so, why?  
Has the suggestion been advanced often? \_\_\_\_\_

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Do your parents approve of your preparing for the Priesthood? Please comment. \_\_\_\_\_

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What talents, skills and experiences will you bring to your work as a priest? \_\_\_\_\_

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Why do you want to join our diocese as a priest? \_\_\_\_\_

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What kind of assignments would you be most interested in as a priest? \_\_\_\_\_

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*What is your current understanding of the following:*

a. a priest's obedience to his bishop \_\_\_\_\_

\_\_\_\_\_

b. a priest's promise to be celibate and chaste \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. a priest's need to live simply and in the midst of his people \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

d. a priest as a prayerful person \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

e. the difference between diocesan and religious order priests \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

f. the Sacraments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

g. Sacred Scripture \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

h. the Holy Eucharist \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What apprehensions do you have about your decision to enter the Seminary and begin preparing for priestly life and ministry? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What attracts you most to the Priesthood? \_\_\_\_\_

\_\_\_\_\_

If you become a priest, what do you think you will be able to contribute, from the perspective of your talents, experiences, and other personal qualities? \_\_\_\_\_

\_\_\_\_\_

In applying for admission, do you make this application of your own free will? \_\_\_\_\_





# PSYCHOLOGICAL EXAMINATION

The Vocation Office has given you the telephone number of the Psychologist to arrange for required psychological testing and interview. Please do not delay in pursuing this testing. A block of your time will be needed in order to complete all that will be involved.

## AUTOBIOGRAPHY AND ESSAYS

Please compose a detailed autobiography of your life that gives an insight into who you are. It would be good to include the following areas:

- † Chronological history of your life
- † Your personal and family life
- † Your personal relationships with your parents and siblings
- † Your experience of the Church
- † Your prayer life and faith experiences
- † Your personal lifestyles and relationships
- † Your attitude toward sexuality and celibacy
- † Your physical and psychological health
- † Your view of the world and society
- † Your leadership ability
- † Your satisfactions and accomplishments
- † Your academic abilities
- † Your vocation and how you arrived at applying to the seminary

*Please include the above in this application form*

If possible, name one priest, besides your pastor, who knows you.

Name \_\_\_\_\_ Parish \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_

Give names and addresses of two persons other than your immediate family who could recommend you as a student for the priesthood.

Name \_\_\_\_\_ Parish \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Parish \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_

Applicant will read and sign the following statement:

*To the best of my knowledge the statements in this application are complete and accurate.*

\_\_\_\_\_  
Signature of Applicant Date



Send all requested information to:

Rev. Michael Norton  
Vocation Promoter  
Diocese of Covington  
1125 Madison Ave.  
Covington, KY 41011