

ANNUAL STATISTICAL REPORT
DIOCESE OF COVINGTON

Parish Name: _____
City: _____, KY

January 1, _____ to December 31, _____

To be made in duplicate, one copy for the parish archives, the other to be submitted to the Chancery before February 1 of the current year with a transcript of Baptism, Confirmation, Marriage and Funeral records.

CHURCH REPORT

1. Pastor/Administrator/Collaborator:

Address

Tel. No.

2. Parochial Vicar and/or Priests in residence:

3. Hours of Obligation Masses:

Saturday Evening:

Sunday:

Eve of Holy Day:

Holy Day:

Summer Mass Times: (If summer schedule differs)

Saturday Evening:

Sunday:

Eve of Holy Day:

Holy Day:

4. Names/locations of Missions, if any:

Regular hours of Mass in each:

5. Did you incur any extraordinary expenses beyond 5% of your ordinary income or \$5,000 (whichever is smaller)?

Date of authorization by the Ordinary?

6. Since the last report has any parish money been invested?

In the Diocesan Deposit and Loan Fund?

In any other way?

If so, give the date of authorization by the Ordinary:

7. Has any real estate been purchased in the past year?

Has deed been recorded and sent to the Chancery Office?

8. What is the basis of the insurance coverage on the church property?

Actual cash value?

What percentage?

Replacement value?

What percentage?

9. Is there an up-to-date register kept of Mass intentions?

Number of stipends on hand:

10. Is there a special bank account for Mass stipends?

In what bank?

11. How many founded Masses in parish?

Are they listed and posted in Sacristy?

How are funds invested?

Has obligation for past year been satisfied?

PARISH STATISTICS

Parish Name _____ KY

1. Is the Parish Census up to date?
2. Number of first Communion during the year:
3. If Confirmation was administered this year, state total number confirmed (a+b):
 - a. Number confirmed by the Bishop or a priest delegated by him:
 - b. Number confirmed by the parish clergy (i+ii):
 - i. after Baptism or entrance into the Church by profession of faith:

ii. in danger of death:

Note: All confirmations are to be recorded in the parish register.

4. Number of converts received into full communion with the Church by **profession of faith** (not baptisms) This number matches the sacramental record form "Baptized Christians Received into Full Communion with the Catholic Church":

TOTAL NUMBER OF										
Households*:		Persons:		Baptisms: ***			Marriages:		Deaths:	
Catholic	Mixed	Practicing**	Lapsed	1 year or less	1 to 7 years	over 7 years	Catholic	Mixed	Adults	Infants

- * Household is any dwelling unit (home or apartment) in which at least one Catholic person resides.
- ** Included under the title "practicing Catholic" should be anyone who professes to be Catholic and attends church at least occasionally (i.e. four or five times a year). All others should be considered "lapsed Catholics."
- *** Total Baptisms, including baptisms administered at Easter Vigil.

Note any significant changes in statistics from last year and reasons for them:

5. Have you an up-to-date Baptismal, First Communion, confirmation and Death register?
6. Do you have a special file in good order for all pre-marital investigations and marriage case papers?
7. Are all official diocesan papers and correspondence kept in order in a steel file?
8. Is a regular course of instructions given each year for prospective converts?
Does the parish have an RCIA program?
9. Is the non-Catholic party to a mixed marriage given the instructions prescribed by diocesan policy?

10. List sodalities and confraternities in your parish and the number of members of each:

For Men	For Women

11. Do you have a St. Vincent de Paul Society?

PARISH EDUCATION REPORT

Parish Name: _____, KY

1. Have you a parish grade school? Number of classrooms: What grades:

 How financed - By full parish subsidy? By partial parish subsidy?

 Tuition? How much?
2. Pupils enrolled - Boys: Girls: Total enrollment:
3. Number of teachers – Priests: Religious: Lay:
4. Have you an inter-parochial grade school? Number of classrooms: What grades:
5. Number of teachers – Priest: Religious: Lay:
6. Parish Pupils enrolled – Boys: Girls: Total parish enrollment:
7. Have you a Parochial High School? Number of classrooms:
8. Pupils enrolled – Boys: Girls: Total enrollment:
9. Number of teachers – Priests: Religious: Lay:
10. Pupils of the parish attending –
 Other Catholic Grades Schools: Public Tax-Supported Grade Schools:

 Other Catholic High Schools: Public Tax-Supported High Schools:

 Catholic Colleges or Universities: State/Other Colleges or Universities:

 Total:
11. How often is religious instruction given?

 In Parochial Grade School, by priests: By others:

 In Parochial High School, by priests: By others:

 To children attending Public Grade Schools:

 By whom: Average attendance:

 To children attending Public High Schools:

 By whom: Average attendance:

12. Do the children from Parochial Schools and the children in CCD classes celebrate their first Sacraments together?
13. Do you have sacramental preparation classes for the parents of children receiving Sacraments for the first time?

Are the parents of children in Parochial School and the parents of children in the CCD program invited together to the same parent preparation classes?

14. Do you have a local Board of Total Catholic Education (cf. Policy, April 1982)
15. Do you have the services of a professional DRE/CRE?
16. Is there an Adult Education Program in your parish?

PERSONAL INVENTORY

NAME:

NAME OF PARISH:

DATE:

List the location of your will and name of executor:

Is there a copy of your will in the Chancery Office?

List your personal effects. Everything in parish buildings not enumerated here will be considered parish property.

HISTORICAL DATA

Please state briefly any historical data of this parish since last year, viz., clergy changes, cost and description of buildings, improvements, dedications, blessings, anniversaries, and other items deemed worthy of record, giving dates.

NAME OF PARISH:

DATE:

SIGNED: _____
Pastor/Administrator/ Collaborator

PARISH CHAIRPERSONS

Parish Name:

City:

KY

January

Chairperson of Parish Council	
Name:	
Address:	
Expiration Month:	Year:
Chairperson of Parish Liturgical Committee	
Name:	
Address:	
Expiration Month:	Year:
Person in Charge of Liturgical Music	
Name:	
Address:	
Expiration Month:	Year:
Chairperson of Board of Catholic Education	
Name:	
Address:	
Expiration Month:	Year:
Chairperson of Finance Committee	
Name:	
Address:	
Expiration Month:	Year:
Person in Charge of Youth Activities	
Name:	
Address:	
Name:	
Address:	
Persons in Charge of Scouting	
Name:	
Address:	
Name:	
Address:	
Persons with Special Competence who may be able to serve on Diocesan Committees	
Name:	
Address:	
Field of Expertise:	

