

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.

<b>CHURCH REPORT</b>
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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. Is there an up-to-date register kept of Mass intentions?

Number of stipends on hand:

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

In what bank?

7. How many founded Masses in parish?

Are they listed and posted in Sacristy?

How are funds invested?

Has obligation for past year been satisfied?

Year

**PARISH STATISTICS**

Parish Name: \_\_\_\_\_ City: \_\_\_\_\_

**Number of Households:**

Catholic: \_\_\_\_\_

Mixed: \_\_\_\_\_

Total Households: \_\_\_\_\_

**Number of Individuals:**

Practicing: \_\_\_\_\_

Lapsed: \_\_\_\_\_

Total Individuals: \_\_\_\_\_

**Baptisms (including Easter Vigil):**

1 year or less: \_\_\_\_\_

1 to 7 years: \_\_\_\_\_

Over 7 years: \_\_\_\_\_

Total Baptisms: \_\_\_\_\_

**First Communions:** \_\_\_\_\_

*Note: This number must match the number of individuals on the Baptismal Register sacramental report.*

**Confirmations:**

By the Bishop (or a priest delegated by him): \_\_\_\_\_  
(Parish confirmation class)

By parish clergy:

After Baptism or entrance into church by Profession of Faith (OCIA): \_\_\_\_\_

In danger of death: \_\_\_\_\_

Total confirmed by parish clergy: \_\_\_\_\_

Total Confirmations (Bishop + parish clergy): \_\_\_\_\_

*Note: This number must match the number of individuals on the Confirmation Register sacramental report.*

**Converts received into full communion with the Church by profession of faith (not baptism):** \_\_\_\_\_

*Note: This number must match the number of individuals on the "Baptized Christians Received into Full Communion with the Catholic Church" sacramental report.*

**Marriages:**

Catholic: \_\_\_\_\_

Mixed: \_\_\_\_\_

Total Marriages: \_\_\_\_\_

**Deaths:**

Adults: \_\_\_\_\_

Infants: \_\_\_\_\_

Total Deaths: \_\_\_\_\_

*Note: This number must match the number of individuals on the Matrimonial Register sacramental report.*

*Note: This number must match the number of individuals on the Death Register sacramental report.*



## PARISH EDUCATION REPORT

Parish Name: \_\_\_\_\_ City: \_\_\_\_\_

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:

**PARISH EDUCATION REPORT - PAGE 2**

Parish Name: \_\_\_\_\_ City: \_\_\_\_\_

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**

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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.

## **PERSONAL INVENTORY**

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NAME:

NAME OF PARISH:

DATE:

List the location of your will and name of executor:

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## **HISTORICAL DATA**

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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

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







