



**Marital Information:**

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced  
(Check one)  
\_\_\_\_\_ Legally Separated \_\_\_\_\_ Other

If you **HAVE** been married, was it:

\_\_\_\_\_ In a Catholic Church \_\_\_\_\_ In another church or synagogue

\_\_\_\_\_ In a civil ceremony \_\_\_\_\_ Common Law

For your **PRESENT** marriage, please give:

Name of Spouse: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Church/Court/Synagogue/Other Month / Date / Year

If Spouse is Catholic, **AND** marriage was outside of the Catholic Church, was the marriage blessed: YES / NO  
**\*\*\* Please provide a copy of your marriage license\*\*\***

**Marital Information (continued):**

If you are **DIVORCED AND REMARRIED** or **SIMPLE DIVORCE**, Please indicate the following:

Former Spouse: \_\_\_\_\_ Former Spouse's Religion: \_\_\_\_\_  
Full Name

If former Spouse was Catholic, was this marriage "blessed"? Indicate: YES or NO or N/A

If **YES**, Place of Marriage: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Name of Church Month / Date / Year

If **NO**, Place of Marriage: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Or N/A) Name of Church/ Court Month / Date / Year

Address of the Place of Marriage: \_\_\_\_\_  
City / State

Manner of Termination: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month / Date / Year

Annulment of Marriage (Please Circle): YES or NO or IN PROCESS

**Information about your present spouse or fiancé(e):**

Name (including maiden): \_\_\_\_\_

He/She Baptized: YES or NO If **YES**, in what faith tradition: \_\_\_\_\_

His Her Religion: \_\_\_\_\_ Date of pending marriage & place: \_\_\_\_\_

Has He/She been married previously? YES or NO

If **YES**, provide the following information:

Name of his/her previous spouse: \_\_\_\_\_

Place of marriage: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Church/Court, etc. City/State Month / Date / Year

Manner of Termination: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name(s) of churches you have attended: \_\_\_\_\_

Describe your religious or Sunday school training: \_\_\_\_\_

What is your present religious affiliation? \_\_\_\_\_

What church do you presently attend? How often? \_\_\_\_\_

What, or who, has prompted you to inquire about the Catholic Church at this time?

What members of Holy Ghost Parish do you know? \_\_\_\_\_

***For Team Use Only***

*Paperwork must be reviewed by both the R.C.I.A. Director/Coordinator and the D.R.E. for Holy Ghost.*

Paperwork reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
R.C.I.A. Coordinator

\_\_\_\_\_ Date: \_\_\_\_\_  
Holy Ghost D.R.E.

**Documentation needed:**

*Place a checkmark by the item needed for this inquirer.*

- Copy of Baptismal Certificate
- Letter Affirming Baptism
- Lack of Form
- Blessing of Marriage
- Annulment Needed
- Sponsor Form
- Record of Sacrament Form

**Documentation Received:**

*Upon receipt of documentation, check-off item, initial & date.*

- Copy of Baptismal Certificate
- Letter Affirming Baptism
- Lack of Form
- Blessing of Marriage
- Annulment Finalized
- Sponsor Form
- Record of Sacrament Form