Application for Sponsorship in the Seminary Program

After completion, please submit to: Vocation Director I The Diocese of Saginaw I 5800 Weiss St. Saginaw MI 48603

THE ROMAN CATHOLIC DIOCESE OF SAGINAW

UPLOAD

APPLICATION FOR:

Sponsorship in a Seminary Program

Please paperclip ***two passport-size photos*** *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 above)

_____
(Number) (Street) (Apt.#)

_____
(City) (State) (Zip Code)

Telephone Numbers (please include area codes)

Home: _____Other: _____

Personal Email:_____

Age: _____ Date of Birth: _____ Place of birth: _____
(mm/dd/yy)

S.S.#:_____D.L.# _____

Home Parish: _____ Pastor:_____

Address:_____

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PART I: PERSONAL INFORMATION

SECTION I: 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 have been involved since age 14: _____

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: _____

C. Sacramental and Religious Practice

How frequently do you participate in the Sacrament of Reconciliation?

_____

How frequently do you participate in the Holy Eucharist?

_____

Do your parents practice their faith regularly?_____

Please note the usual religious practices in your home:_____

Describe how you pray?_____

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.

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

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? _____

D. Religious History

Are you a convert to Catholicism? ___• YES ___NO___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?___YES___NO__If yes, please describe situation in detail:_____

E. Previous Experience in Religious Life

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

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:_____

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:_____

Have you ever bound yourself by any oaths, vows, or promises in any kind of religious organization, secret society or cult? __YES__ NO If so, please specify:

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?_____

SECTION II: CANONICAL STATUS

(Please complete this section in the presence of your Vocation Director.)

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 of 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 (i.e. have you ever been involved in the taking of another human life; have you ever helped someone procure an abortion, performed an 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

SECTION III: LEGAL STATUS

Are you a citizen of the United States? ___YES___NO_ If not, of what country are you a citizen?_____

Do you have a passport?__Y___N Number:_____Place of Issue:_____ Exp. date:_____

Immigration Status:_____

Are you a permanent resident of the United States?___YES___NO_____

Have you ever been arrested?___YES___NO_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 or misdemeanor? (other than civil infraction such as a traffic offense) ___YES___NO_____

SECTION IV: FAMILY BACKGROUND

A. Your Parents

Father

Name_____

Birthplace_____

_(•)_ Living ( ) Deceased

Father

If deceased:

Cause of death:_____

Age at death:_____

Year of death:_____

If living:

Address:_____

_____

_____

Telephone:

Highest grade completed:

Occupation:_____

Religion:_____

Convert? Yes No

Mother

Name_____

Maiden Name_____

Birthplace_____

_(•)_ Living ( ) Deceased

Mother

If deceased:

Cause of death:_____

Age at death:_____

Year of death:_____

If living:

Address:_____

_____

_____

Telephone:

Highest grade completed:

Occupation:_____

Religion:_____

Convert? Yes ____No

Parents' marital status: _____

If divorced, has either parent remarried? Yes No

Stepfather's complete name:_____

Stepmother's complete name:_____

B. Brothers and Sisters

	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, between parents and each child, between children).

C. Other Items

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

Name:_____ Name:_____
Address: _____ Address: _____
Relation:_____ Relation:_____
Telephone:_____ 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? YES NO If yes, describe what and when briefly:

How was your health as an adolescent?___
Have you ever had any serious illnesses, accidents, surgeries, handicaps or physical limitations? Please describe briefly: _____

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.? _____

How many days of work or school did you miss last year due to illness?_____
Cause:

Do you have any history of substance abuse/chemical dependency (drugs, alcohol, etc.)?___YES___NO__ If yes, give details:

___

Have you ever been involved in a chemical dependency or substance abuse program __YES___NO_ If yes, list when and where: _____

Have you ever been in a treatment program for abuse of any kind?__YES___NO__
If yes, list when and where: _____

What is your weekly alcohol consumption?_____
What do you generally drink? _____
How would you classify your drinking? none light moderate heavy

Do you smoke or chew tobacco?__Y__N If yes, how much?_____

Do you take prescription drugs?__Y__N If yes, please list:_____

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

Have you ever been the victim of physical or sexual abuse?__Y__N If yes, Please give details

Do you exercise?__Y__N If yes, how?_____How often?_____

When did you last have a physical examination?_____

B. Counseling/Therapy

List any experiences with counseling therapy:_____

Please provide name of doctors, therapists, counselors, their addresses, telephone numbers, and dates of experiences:

C. Your Physician and Medical Insurance

Name of Personal Physician:_____
Address: _____
_____
Telephone _____
Do you have medical insurance?__YES__NO Please indicate company and type of policy/coverage:_____
Who is financially responsible for the premium today?_____
How long will this coverage be available to you?_____

SECTION VI: EDUCATIONAL BACKGROUND

A. Grade Schools *(List in order the schools you have attended.)* Catholic? ○ Y ○ N

Name	City/State	Date

B. Secondary Schools (high schools) Catholic? ○ Yes ○ No

Name	City/State	Dates

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.) _____

D. Colleges, Universities, Seminaries

School	Location	Dates Attended	Major

E. Degrees

Please list degrees earned and details (school, location, major, GPA and honors, if applicable):_____

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

Honors and Awards:

G. Other Educational Background Information

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

Which did you like least? _____

Did you ever fail any courses? YES NO
(specify)

_____

What was the last grade or class you successfully completed? _____

Have you ever been interrupted in a course of study? If yes, please give dates and reasons:

_____

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:_____

Please indicate any studies in the Latin language:_____

Have you ever participated in any forms of public speaking, debate, oratory, or acting? State which. _____

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? __YES__ NO
If yes, please explain: _____

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

Did you have any academic problems in school?__YES NO_____

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 sheet if needed): _____

Your current or most recent job:
Name of your employer: _____
Address:____ _____
Job Title:_____Duration:_____
Describe your duties in detail:_____

Salary/Wage: _____

What did you like most about your job:

What did you like least?

Reason for leaving:
Have you ever been fired from a job? YES NO If yes, indicate why:

Please indicate any professional organizations to which you belong:

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

B. Financial Status

Income

Indicate present salary:
weekly_____monthly_____, yearly_____
Do you regularly file your income tax?__Y__N Give W-2 amounts for last two years:
Do you have a guaranteed income? _____Yes No
If yes, please indicate from where and the amount:

Retirement Benefits:	$
Disability Benefits:	$
Summer Employment:	$
Investment income:	$
Social Security Benefits:	$
Other:	$

Assets	value
Real Estate:	$
Investments:	$
Savings:	$
Car:	$
Other:	$

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:

Bank/agency holding loan(s)	Interest rate	Years incurred	Amounts

C. Personal Expenses

The student in the seminary is expected to be personally responsible for such expenses as: clothing, toiletries, postage, entertainment, transportation and (if he has a car) automobile insurance, fuel and maintenance.

Do you anticipate that you will be able to cover such personal expenses?

____Yes ____No

If you plan to receive assistance in meeting your personal needs during the school year, please list those from whom the support will come and the amount of support you expect to receive:

	$
	$
	$
	$

If you have family or friends who are financially dependent upon you, please give details:

_____

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 provided 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. How much free time do you have? 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 any kind of leadership you have exercised in your free time activities.

Describe your relationships with your friends: who are they, what do you 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 (one in which you were seriously considering marriage)?	Yes	No
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?___YES___NO_____

Have there ever been any fearful or distressing events in your life that you have not mentioned thus far in this application?___YES___NO_____

Are you at ease in the presence of others?___YES___NO_____

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

State some instances where you feel you have helped others:

Describe your own personality as you view it:_____

From your experience, what are your greatest strengths? What do you consider your strongest qualities or characteristics?

What do you regard as your particular talents?

Is there anything you would like to change about yourself? Specify. _____

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: _____

Who, besides yourself, contributed most to your consideration of the Priesthood?
Why?_____

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

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

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

Why do you want to join our Diocese as a priest? _____

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

If you were not to become a priest, what other ways of life or careers would you consider?

_____

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?

Some of the obstacles which can impede a person in coming to a definite decision regarding Priesthood are listed below. Comment on each as it affects you.

a. Selfishness

b. Inability to make decisions

c. Intellectual capacity

d. Celibacy

e. Lack of courage

f. Inadequate spiritual life

g. Inadequate understanding of the Faith

h. Other special obstacles in your way (specify)

Do you think that being a priest could make your life more meaningful than being in some other field of endeavor?

Do you think of the priest's life as a happy life?_____

As a priest, what do you think would be the area of your greatest difficulty in being effective?

* * * * * * * * * * * * * *

In applying for admission, do you make this application of your own free will?__YES NO

CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND CONTACT REFERENCES OR OTHER INDIVIDUALS AND AUTHORIZATION AND RELEASE FOR SUCH PARTIES TO PROVIDE INFORMATION

I understand that the Seminary and the Diocese will be contacting my references and other individuals to verify the information in my application and to obtain additional information with regard to my suitability for sponsorship in the Seminary program. hereby consent to the asking and the individuals contacted to release and provide information on myself, my family, friends and background information on my past experiences and activities. I release the Seminary, the Diocese and the individuals contacted from any and all liability, for any reason, which may relate to any information requested or provided.

Signature of Applicant_____**Date** _____

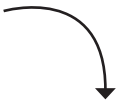
PART II: AUTOBIOGRAPHY & ESSAYS

A. Autobiography

Please compose a detailed autobiography (about 4-5 typed pages) of your life that gives 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

You may attach typed pages to the application form.



B. Two Essays (length: one page each)

1. Write a brief essay entitled: UPLOAD
   "Why I Want To Be a Priest"
2. Write a brief essay entitled: UPLOAD
   "My Understanding of Living a Celibate Life"

After completion please click the SUBMIT button below to email to:
vocations@diosag.org

SUBMIT