

PRECATECHUMENATE QUESTIONNAIRE

St. Patrick's Catholic Church

710 West Marion Street – Joliet, IL 60436 ♦ (815) 727-4746

IF YOU ARE A BAPTIZED CATHOLIC, you will need to provide a NEW (original) baptismal certificate from your parish of baptism. If you have been baptized in another faith, a copy of your original certificate will suffice.

IF YOU ARE CURRENTLY MARRIED, you will also need to provide a copy of your marriage certificate prior to the Easter Vigil.

Date: _____

Name: _____
First Last Maiden

Address: _____
Street City County State Zip

Home Phone: _____ Work Phone: _____

Date of Birth: _____ Place of Birth: _____

Father's Name: _____ Religion: _____

Mother's Name: _____ Religion: _____
Include Maiden Name

CONCERNING YOURSELF:

Occupation: _____

Present Marital Status: Married Single Engaged* Separated Divorced**

**If engaged, please provide the following:*

Date of Wedding: _____ Location: _____

**** If divorced, please speak to facilitator before continuing the RCIA Process.**

MARRIAGES:

Have you previously been married in church, civilly, or in common law?

Yes No

*If the answer is "YES":

Current Marriage

Spouse's Name: _____ Religion: _____
Please include maiden name, if applicable.

Date of Marriage: _____

Place of Marriage: _____ City & State: _____

Previous Marriage #1

Spouse's Name: _____ Religion: _____
Please include maiden name, if applicable.

Date of Marriage: _____

Place of Marriage: _____ City & State: _____

How Marriage Ended: _____

Previous Marriage #2

Spouse's Name: _____ Religion: _____
Please include maiden name, if applicable.

Date of Marriage: _____

Place of Marriage: _____ City & State: _____

How Marriage Ended: _____

If you need additional space, please use the back of this form.

CHILDREN:

	Name	Date of Birth	Religion
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

If you need additional space, please use the back of this form.

IF ENGAGED:

Spouse's Name: _____ Religion: _____

Has your Fiancé(e) been previously married? Yes No

*If the answer is "YES":

Previous Marriage #1

Spouse's Name: _____ Religion: _____
Please include maiden name, if applicable.

Date of Marriage: _____

Place of Marriage: _____ City & State: _____

How Marriage Ended: _____

Previous Marriage #2

Spouse's Name: _____ Religion: _____
Please include maiden name, if applicable.

Date of Marriage: _____

Place of Marriage: _____ City & State: _____

How Marriage Ended: _____

If you need additional space, please use the back of this form.

SACRAMENTS RECEIVED:

BAPTISM:

Have you ever been baptized, christened, Yes No
or sprinkled in any religion?

*If the answer is "YES":

Date of Baptism: _____

Name of Church: _____ City & State: _____

Denomination: _____

Name of Minister: _____

Name of Sponsor(s): _____

COMMUNION:

Have you received First Communion in a Catholic church? Yes No
*If the answer is "YES":

Date of 1st Communion: _____

Name of Church: _____ City & State: _____

CONFIRMATION:

Have you received Confirmation in a Catholic church? Yes No
*If the answer is "YES":

Date of Confirmation: _____

Name of Church: _____ City & State: _____

Name of Minister: _____

Name of Sponsor(s): _____

GENERAL INFORMATION:

What is your present religious affiliation? _____

Name of church you attend: _____ City & State: _____

Names of other churches you have attended:

Describe your religious or Sunday School training:

Why do you wish to join the Catholic Church at this time?

- I want to become a Catholic.
- I think I might want to become a Catholic.
- I'm just looking to see what the Catholic Church has to offer.
- I want to find out more about the Catholic Church.
- I don't want to join, but just want to know what Catholics believe.
- I'm Catholic, but have had little or no contact with the Church.
- Other

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

Please give any further information which might be helpful to us: