

# Initiation Questionnaire – Adults

Name: _____	
Address: _____	
City: _____	Zip Code: _____
Phone ( <i>Day</i> ): _____	Phone ( <i>Evening</i> ): _____
Email: _____	
Date of Birth: _____	Place: _____
Father's Name: _____	Religion: _____
Mother's Name: _____	Religion: _____
(maiden name)	

1. Were you ever baptized? \_\_\_\_\_ No \_\_\_\_\_ Yes If yes, please answer:

Name of Church: \_\_\_\_\_

Address of Church: \_\_\_\_\_

Denomination of Church: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Officiant: \_\_\_\_\_

2. Have you ever been confirmed? \_\_\_\_\_ Received communion? \_\_\_\_\_

Church: \_\_\_\_\_ Church: \_\_\_\_\_

Denomination: \_\_\_\_\_ Denomination: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

3. Have you ever been accepted as a catechumen or a candidate in the Catholic Church? \_\_\_\_\_

If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

4. Are you currently married? \_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, to whom are you currently married? \_\_\_\_\_

Date & place of marriage: \_\_\_\_\_

Officiant: \_\_\_\_\_  
(name) (title)

Prior to this marriage, have you ever been married to another person in church, civilly or in common law? \_\_\_\_\_ No \_\_\_\_\_ Yes If yes, please answer *No. 1* below.

Has your spouse ever been married (prior to your marriage) to another person in church, civilly or in common law? \_\_\_\_\_ No \_\_\_\_\_ Yes If yes, please answer *No. 2* below.

5. Have you ever been married to another person in church, civilly or in common law? \_\_\_\_\_  
If yes, please answer *No 1* below.

***No. 1 – PREVIOUS MARRIAGE(S) OF INQUIRER:***

How many times were you married? \_\_\_\_\_

To whom? \_\_\_\_\_

Date: \_\_\_\_\_ Officiant: \_\_\_\_\_

Place: \_\_\_\_\_

If your former spouse is deceased, give:

Date of death: \_\_\_\_\_ Certificate number: \_\_\_\_\_

If your former marriage(s) was/were dissolved or declared null by the Church give:

Diocese & Protocol No. \_\_\_\_\_ Date of decree: \_\_\_\_\_

***No. 2 – PREVIOUS MARRIAGE(S) OF CURRENT SPOUSE***

How many times was he or she married? \_\_\_\_\_

To whom? \_\_\_\_\_

Date: \_\_\_\_\_ Officiant: \_\_\_\_\_

Place: \_\_\_\_\_

If their former spouse is deceased, give:

Date of death: \_\_\_\_\_ Certificate number: \_\_\_\_\_

If their former marriage(s) was/were dissolved or declared null by the Church give:

Diocese & Protocol No. \_\_\_\_\_ Date of decree: \_\_\_\_\_

Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_