

APPLICATION FOR POSTULANCY
Certificate Required under Title III, Canon 8, Section 2

Diocese of Pennsylvania

To the Right Reverend _____,
Bishop of Pennsylvania

I hereby make application to be admitted by you as a Postulant for Holy Orders.

My Full Name is _____

My Address is _____

My Phone Numbers are (H) _____ (B) _____ (Sch) _____
(Cell) _____ Email _____

I was born on _____, in _____, _____
(Month/Day/Year) (City) (State)

I have resided in this Diocese since _____

The following answers should be as complete as possible, noting if information is unavailable or not applicable.

I was baptized in (name and location) _____ Church,
_____, _____, _____

On _____, by _____.

I was confirmed in (name and location) _____ Church,
_____, _____, _____

on _____, by the Rt. Rev. _____,
Bishop of _____.

I was admitted to Holy Communion in (name and location) _____
Church, _____, _____ on _____
_____.

My Marital History: _____

Spouse (Name & date of birth) _____

Children (Names & Dates of Birth) _____

(Over)

The level of education I have attained, with degrees earned, if any, and my areas of specialization
Education (secondary) College. List in order: Names, year graduated, and degree earned:

Military or Alternative Service: _____

Employment (Present & Previous, Position & Dates): _____

List any other information concerning your background which can be used in determining your
application for Postulancy and eventual Ordination.

I am moved to seek the Sacred Ministry because: _____

Have you applied through another parish for postulancy or candidacy? If so, where?

Signed _____ Date _____