APPLICATION FOR ADMISSION TO INITIAL FORMATION **DOMINICAN LAITY**

Welcome to the Dominican Laity. To begin your initial formation, please complete this form and submit it to the Formation Director of this Chapter. The information you provide will be seen only by the members of the chapter council all of whom are bound by the highest standards of confidentiality. Please know that you must be a sacramental Catholic for at least two years to apply.

Chapter							* ~
Date							
Name						DAR D	
Address							EDICERE
City				State		Zip	
Phone	Cell _		Work			_	
E-Mail						-	
Birth		_ Place					
Baptism		_ Place					
First Confession and Date							
		Place					
Confirmation _		_ Place					
Marriage		_ Place					
Present Parish							
Marital Status	Single	Married _	Wid	lowed _	_ Divo	orced	Separated
If divorced, have you	remarried? Has	s your first ma	rriage be	en Prope	rly anı	nulled?	
Have you ever been p	rofessed as a lay	y member in th	ne Domir	nican Oro	der? If	so, where	and when
Have you ever been p	rofessed in anot	ther Order as a	secular?	If so, w	here a	nd when?	
Are you a former prie dispensation from vov		gious? If so, p	olease att	ach docu	ımenta	tion on lai	cization or

Have you ever been ordained to the presbyterate? If so, where and when?

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Have you ever been treated for any psychological disorder or addiction? If so, please explain.
Where did you first hear about the Dominican Laity?
Who was your first contact?
What are you looking for from the Dominican Laity?
What is your present prayer life?
What religious studies have you pursued? What are you reading now?
Have you ever belonged to a cult?
Have you ever belonged to another religious denomination or sect? Which one(s)?
Present Religious Practice (include frequency of Mass attendance, reception of the Sacraments, Scripture reading, and private prayer, as well as how you've supported your faith through education):
What is your educational background?
What is your occupation?
What additional information would you like to include?

In order to best serve God and his Church we ask the following questions that pertain to the faith.

Do you believe and profess all that the Holy Catholic Church teaches, believes and proclaims to be revealed by God?		Yes		No
Do you believe the Church's teaching about the inviolability of human life as sacred and must be protected and respected from the moment of conception until natural death?	_	Yes	_	No
Are you affiliated with, or supportive of, any organization, which supports, encourages, provides or otherwise endorses abortion or euthanasia?	_	Yes	_	No
Do you believe the Church's teaching about the sinfulness of contraception?		Yes		No
Do you believe that marriage between man and woman?		Yes		No
Do you accept the Church's teaching that any extra-marital sexual relationships are gravely evil and that these include pre-marital relations, masturbation, fornication, the viewing of pornography and homosexual acts?		Yes		No
Do you believe the teaching of the Church about the evil of homosexual acts basing itself on Sacred Scripture?	_	Yes		No
Do you believe all that the Church teaches about the Reality and Presence of Christ in the Most Holy Eucharist?	_	Yes		No
Do you believe what the Church teaches regarding Mary, Mother of Christ and Mother of the Church and accept with the Church that it is fitting and proper to honor the Blessed Virgin with special devotion?		Yes		No
Do you believe that it is possible for a person to choose to remain separated from God for all eternity and that this state of definitive self-exclusion from communion with God and the blessed is called hell?		Yes		No
Do you that those who die in God's grace and friendship but are still imperfectly purified undergo additional purification that the Church's name for this final purification is Purgatory?		Yes		No
Do you believe in One, Holy, Catholic and Apostolic Church, and I embrace the teachings about the Church, as enunciated in the Catechism of the Catholic Church?		Yes		No
Do you affirm and believe that the Church teaches with God-given authority and that the promise of Christ to remain with His Church always, until the end of time, is a reality?		Yes	_	No

REFERENCES: Please note references may be contacted.

1. RELATIVE OR FRIEND		
Name		
Address		
City	State	Zip
Phone		
Relationship to you		
2. RELATIVE OR FRIEND Name		
Address		
City	State	Zip
Phone		
Ministry		
3. CLERGY OR RELIGIOUS		
Name		
Address		
City	State	Zip
Phone		
4. FORMER ORDINARY OR Manageriest or vowed religious): Name	AJOR RELIGIOUS SUPERIOR (I	f applicant is a former
Address		
City	State	Zip
Phone		
I,	, certify that the information provided ledge. I understand that all information pr	d by me in this application i
confidential and used only for the expre	ledge. I understand that all information press purpose of ascertaining my eligibility Chapter of the Dacknowledge that the references provided by	for admission to the initia
give my express permission for the author	ized representatives of the	Chapte

to make such contact.	
SIGNED:	DATE: