St. Francis

Adult Education Information Form

*Information is held in **confidence** and is not shared without permission*

Today's Date: _____

OFFICE USE ONLY

☐ **Catechist:** _____

☐ **RCIA:** _____

PERSONAL INFORMATION

Name: _____
First Name *Middle Name* *Last Name* *Maiden Name*

Date of Birth: _____ Place of Birth: _____
City/State/Province/Country

Fathers Name: _____
First Name *Middle Name* *Last Name* *Religion*

Mothers Name: _____
First Name *Middle Name* *Maiden Name* *Religion*

CONTACT INFORMATION

Mailing Address: _____

_____
City *State* *Zip Code*

Home Telephone: _____ Work Telephone: _____ Cell: _____ Provider: _____

E-mail: _____

RELIGIOUS HISTORY

Have **YOU** ever been baptized? ☐ Yes ☐ No ☐ I'm not sure.

If you have been baptized, please answer the following questions completely.

Date of baptism: _____ Denomination: _____ Church of baptism: _____

Church Address: _____
Street *City* *State* *Zip Code*

If **YOU** were baptized **CATHOLIC**, check those sacraments you have already received:

☐ Reconciliation *(confession)* ☐ Eucharist *(First Communion)* ☐ Confirmation ☐ I was baptized in another faith but I am interested in becoming a Catholic.

Are you attending mass at St. Francis? ☐ Yes ☐ No Are you registered at St. Francis? ☐ Yes ☐ No

Do you have someone to be your sponsor ☐ Yes ☐ No Sponsors name: _____

CURRENT MARITAL STATUS

*Note: If you, your fiancé, or your spouse has or have **ANY PRIOR MARRIAGE** in **ANY TYPE OF CEREMONY,** whether civil or in a church, please be sure to check the appropriate boxes below.*

☐ **I am single and have never been married.** ☐ **I am engaged to be married**

Your Fiancés Name: _____ Your Fiancés Religion : _____

Your Marital Information:

☐ **This is my first marriage, I have never been married before.** ☐ **I have been married before.** ☐ **I am currently married.**

Your Spouse's Name: _____ Your Spouse's Religious: _____

Date of Marriage: _____ Locationof Marriage: _____
Name of Church / Civil *City/State/Province/Country*

☐ **I am currently married but separated from my spouse.** ☐ **I am divorced and remarried.** ☐ **I am a widow/widower.**

Your Current Spouse's Marital Information:

☐ **This is his/her first marriage, he/she has never been married before.** ☐ **He/She has been married before.** ☐ **He/She is currently married.**

His/Her Former Spouse's Name: _____ His/Her Former Spouse's Religious: _____

Date of Marriage: _____ Place of Marriage: _____
Name of Church / Civil *City/State/Province/Country*

Notes: _____

_____

_____

Completed Information Forms may be submitted to the Parish Office, emailed to dinah@stfran.org or mailed to:

St. Francis Church
RCIA: Adult Information Form
900 "H" Street
Bakersfield, CA. 93304

Sacrament	Date	Priest
Baptism		
Profession of Faith		
First Holy Communion		
Confirmation		
Marriage		
Convalidation		