

Archdiocese of Baltimore

Pastoral Associate Formation Program

Application

		Applicant In	forma	ation				
Full Name:					Date:			
Address:	Last	First			M.I.			
	Street Address					Apart	ment/Unit #	
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Dhana	City	_	· :1		State	ZIP C		
Phone:			.maii					
		complete the Destard Acc	ooiata	Formatia	n Drogram?	2 years	3 years	
now long w	ould you like to take to	complete the Pastoral Ass Educa		Formatic	on Program?			
High School	l:	Address:_						
From:	To:	Did you graduate?	YES	NO	Degree:			
College:		Address:_						
From:	To:	Did you graduate?	YES	NO	Degree:			
Other:		Address:_						
From:	To:	Did you graduate?	YES	NO	Degree:			
		Sacramental	Inforn	nation				
Baptism Da	te:	Parish:_						
Parish Addr	ess:							
Confirmation	n Date:	Par	ish:					
Parish Addr	ess:							
Marital Statu	us: Married	Single Divorced [arated				
If married, is	s the marriage officially	recognized by the church?			Date:			
If civilly divo	rced, have you obtaine	ed an annulment?	YE		Date:			
If civilly divo	rced, have you applied	I for an annulment?	YE C YE		Date:			
Is your form	er spouse deceased?		<u>'</u>					

References

Please list the contact information for three references, including one professional, one academic and one spiritual. Please also include contact information for your current pastor/pastoral life director and employer. Full Name: Relationship: Phone: Company: Address: Relationship: Full Name: Company: Phone: Address: Relationship: Full Name: Company: Phone: Address: **Current Pastor/Pastoral Life Director and Employment** Name of Current Pastor/PLD: ____ Phone: Address: Current Employer: Phone: Address: NO May we contact your current pastor/PLD or current employer at this time? **Professional Experience** Begin with the most recent. Attach additional pages if necessary. Please attach a resume to this application. Dates of Job Title: Employment: Company: Phone: Address: Reason for leaving: Dates of Job Title: Employment: Company: Phone: Address: Reason for leaving: Dates of Job Title: Employment: Company: Phone: Address: Reason for leaving:

How did you first hear about the Pastoral Associate Formation Program?								
Internet Pastor/PLD Pastoral Minister Relative Friend Other Knowledge of Language(s) other than English (please list):								
Rate your foreign language proficiency as Weak, Good or Excellent:								
Reading: Writing: Speaking:								
List any significant scholastic honors and other honors received:								
List computer skills including specific programs used and any knowledge of computer languages:								
List any other skills or abilities that you would like to be considered with your application:								
Background								
YES NO 1. Have you ever been convicted of a crime, misdemeanor or felony?								
If yes, explain on a separate sheet of paper. YES NO								
2. Have you ever had your volunteer services or employment severed with cause?								
If yes, explain on a separate sheet of paper. YES NO								
3. Have you ever been a Priest, Deacon or member of Religious Institute?								
4. Have you ever been employed in a parish, school or other ministry in the Archdiocese of Baltimore?								
Position: Location:								
Position: Location: Location: If more than three positions, please attach a sheet listing your other positions and locations.								
5. Have you ever been a volunteer in a parish, school or other ministry in the Archdiocese of Baltimore? If applicable, please list other name(s) under which your credits/credentials/experience may be filed: Disclaimer and Signature								
I certify that the information provided on this application is true and complete to the best of my knowledge and agree that falsified information or significant omissions may disqualify me from further consideration for the Pastoral Associate Formation program, and may be considered justification for termination of my participation in the program if discovered at a later date.								
I hereby grant permission to the Archdiocese of Baltimore and related entities to investigate my background, qualifications and references. I hereby release the Archdiocese, related entities, and their agents from liability in connection with investigating and evaluating my application.								
I understand that the Archdiocese of Baltimore reserves the right to conduct a criminal background check.								
I authorize persons and organizations named in this application to provide the Archdiocese of Baltimore with any relevant information that may be required. I further release all parties providing information from any and all liability or claims for damages whatsoever that may result from this information's release, disclosure, maintenance, or use.								
I understand the acceptance into or completion of the Pastoral Associate Formation Program does not guarantee employment with the Archdiocese of Baltimore.								
My signature indicates that I have read and understand the above.								
Applicant Signature: Date:								