

Buffalo Diocese Application for Aspirancy

Permanent Diaconate Program

Please answer all questions as completely as possible, printing legibly. Should you require additional space to complete any section in this application, please attach a separate sheet with the addendum to that section clearly marked. Please return the completed application promptly to:

*Diocese of Buffalo ♦ Admissions & Advisory Committee
Deacon Timothy Chriswell ♦ 795 Main Street ♦ Buffalo, NY 14203
Formation Center – 1st Floor*

PERSONAL INFORMATION

Name _____
LAST FIRST MIDDLE TITLE

Home Address _____
NUMBER & STREET TOWN/CITY STATE ZIP CODE

County _____ **E-mail** _____

Phone: (____) _____ - _____ (____) _____ - _____ (____) _____ - _____
HOME WORK MOBILE

Occupation _____ **Employer** _____

Business Address _____

Date of Birth _____ **Place of Birth** _____

Date of Baptism _____ **Church of Baptism** _____

City & State _____

Date of Confirmation _____ **Church of Confirmation** _____

City & State _____

Present Parish _____

Pastor/Parish Leader _____
NAME CITY/TOWN ZIP PHONE NUMBER

HEALTH INFORMATION

General Health Condition Excellent Good Fair Poor

Describe any physical handicap or chronic illness(s) you may have.

Does your wife, children or other dependents presently have any serious illness? Yes No

If "YES," please describe its nature.

HEALTH INFORMATION, continued...

Date of Last Physical _____ Examining Physician _____
Address _____

MARITAL & FAMILY INFORMATION

Marital Status Married Single Widowed Separated Divorced

Date of Marriage _____ Church of Marriage _____

City, County & State _____

Is this the first marriage (civil or ecclesiastical) for both of you? Yes No If "NO," please explain* _____

*Copies of Ecclesiastical annulment & Divorce Decree must be provided (if applicable)

Wife's Name _____ Maiden _____

Wife's Occupation or Title _____

Wife's Employer _____

NUMBER & STREET TOWN/CITY STATE ZIP CODE

Wife's Phone (____) _____ - _____ (____) _____ - _____
HOME WORK

Wife's Religion _____

Children

Name Age City of Residence (if different from your own) Marital Status

Name	Age	City of Residence (if different from your own)	Marital Status

Siblings

Name

Age

City of Residence

**Living /
Deceased**

5/8/14

ACADEMIC HISTORY

List all schools attended, date of graduation & degree received

Name of Institution

Location

Graduation Date

Degree Earned

High School:			
College:			
MA:			
Ph.D.:			

Describe other educational experiences—include any special training in the military or industry

List any special achievements or awards you have received

FORMATION HISTORY

Have you ever been a candidate for the priesthood, a religious order, society or congregation? Yes No

SEMINARY OR SCHOLASTICATE	TOWN/CITY & STATE	DATES ATTENDED
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Have you ever applied to and not been accepted by a seminary, religious order, society, or congregation in this or any other arch/diocese? Yes No

NAME OF INSTITUTION	TOWN/CITY & STATE	DATE OF APPLICATION
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Have you ever applied to and not been accepted by a permanent Diaconate program in this or any other arch/diocese? Yes No

EMPLOYMENT HISTORY

Begin with current employment; do not leave any years unaccounted for

Dates From ⇨ To	Employer	Address	Position

EMPLOYMENT HISTORY, continued...

Describe any aspect of your employment history that may have a bearing on the ministry of a permanent deacon

LEGAL & FINANCIAL STATUS

Indicate any potential or pending legal action(s) involving yourself or any member of your family

Give an evaluation of your financial status as favorable or unfavorable; *DO NOT* state specific earnings or income but describe your solvency in general terms

REFERENCES

List the names of persons who would be willing to give a character reference:

Name	Complete Address	Telephone
Pastor:		
Parish Staff Person:		

Other: (friend or coworker)		
Other: (friend or coworker)		

Please do not submit more than 4 references.

Have you ever been arrested? _____ Please explain: _____

Have you ever been convicted of a crime? _____ Please explain: _____

Misdemeanor _____ Felony _____

Please provide a Hardcopy of the following with your application:

	Copy of Driver's License
	Baptismal Certificate
	Marriage Certificate
	Photo of yourself and Spouse (Taken with phone against a white wall and sent via email)

SIGNATURE OF APPLICANT

DATE