



# DIOCESE OF BAKER

Department of Canonical Services/Tribunal

01/2018

**For Tribunal Use Only:** Prot. No. \_\_\_\_\_

Case Name \_\_\_\_\_

## APPLICATION FORM

**Please note:** Information on this application form will help determine what type of process is needed. Please make a copy for your files.

**\*\*\*Please remember do not set a wedding date at this time.**

1. Name:  Mr.  Mrs.  Ms.  Miss

Maiden Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

How long have you lived in the Diocese of Baker? \_\_\_\_\_

If you have lived in the Diocese of Baker less than three months, how long do you intend to live here? \_\_\_\_\_

Father's Name and Address: \_\_\_\_\_

Mother's Name and Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Religion: \_\_\_\_\_

Religion: \_\_\_\_\_

2. Have you ever been baptized, christened, or sprinkled in any religion?  Yes  No

If so, when? \_\_\_\_\_

Religion: \_\_\_\_\_

Where? \_\_\_\_\_

If you have never been baptized, who can verify this? \_\_\_\_\_

\_\_\_\_\_

What is your *present* religion? \_\_\_\_\_ Date of Initiation? \_\_\_\_\_

If you are not a Catholic, are you presently taking instructions in the Catholic Faith? \_\_\_\_\_

If so, what is your projected date of entry into the Catholic Church? \_\_\_\_\_

3. Please list *all* of your former spouses (including maiden name), and fill out a separate "Information Concerning Former Spouse" form regarding each:

1<sup>st</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

2<sup>nd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_

4. Have you ever applied to any Catholic Church Tribunal for a decision regarding your former marriage(s)?

Yes  No

If so, please explain when, where, and circumstances: \_\_\_\_\_

5. Are you presently remarried?  Yes  No OR Are you planning to remarry?  Yes  Not presently

6. Name of *present or future* spouse (include maiden name): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Present Religion: \_\_\_\_\_

Has he/she ever been baptized, christened, or sprinkled in any religion? \_\_\_\_\_

If not, how do you know this? \_\_\_\_\_

If yes, when? \_\_\_\_\_ Place of Baptism (name of church, etc.): \_\_\_\_\_

Religion \_\_\_\_\_ City/State \_\_\_\_\_

If applicable: Date of Marriage: \_\_\_\_\_

Place of Marriage(name of church, courthouse, etc.) \_\_\_\_\_

City/State \_\_\_\_\_

Has your *present or future* spouse been married before?  Yes  No How many times? \_\_\_\_\_

How did marriage end?  Divorce  Death  Civil Annulment

Date of decree and/or death: \_\_\_\_\_

Place where decree was issued: \_\_\_\_\_

Has he/she petitioned for or received a declaration of nullity of his/her previous marriage? \_\_\_\_\_

***If there were more previous spouses, please list on separate page.***

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Printed Name of Assisting Pastoral Minister

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Assisting Pastoral Minister

PLEASE RETURN APPLICATION TO:

Tribunal Office  
641 SW Umatilla Ave.  
Redmond, Oregon 97756

Church \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ [seal]

# BAKER DIOCESAN TRIBUNAL

Information Concerning Former Spouse

Please note: This form be completed for each former spouse.

*For Tribunal Use Only:* Prot. No. \_\_\_\_\_

Case Name \_\_\_\_\_

No application can be made until the divorce is finalized.

**APPLICANT:** \_\_\_\_\_

1. This page refers to my  first  second  third spouse.

**Present legal name** of former spouse:  Mr.  Ms.  Mrs.  Miss

Maiden Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Father's Name and Address: \_\_\_\_\_

Mother's Name and Address: \_\_\_\_\_

Religion: \_\_\_\_\_

Religion: \_\_\_\_\_

2. Was this former spouse baptized in any religion?  **Yes**  **No**  **Unknown**

If yes, date of baptism: \_\_\_\_\_ Religion: \_\_\_\_\_

Place of baptism: \_\_\_\_\_

**Present** religion of this person: \_\_\_\_\_

3. Date of Marriage: \_\_\_\_\_ City & Place (Parish): \_\_\_\_\_

Religion at time of marriage:  
\_\_\_\_\_ (man) \_\_\_\_\_ (woman)

If one party was Catholic, did this marriage take place in the Catholic Church?

**Yes**  **No**  **Does not apply**

If not, was church permission granted for a marriage outside the Catholic Church?

**Yes**  **No**  **Does not apply**

If not, was the marriage later validated in the Catholic Church?

**Yes**  **No**  **Does not apply**

Date of Church Validation: \_\_\_\_\_

Place of Church Validation: \_\_\_\_\_

4. How long did you two go together before marriage? \_\_\_\_\_

How old were you at the time of this marriage?

\_\_\_\_\_ (man) \_\_\_\_\_ (woman)

How long did you live together as husband and wife? \_\_\_\_\_

How many children were born of this marriage? \_\_\_\_\_

How many children are still minors? \_\_\_\_\_

5. Date of final divorce/civil annulment decree: \_\_\_\_\_  
County / State: \_\_\_\_\_

Are all legal obligations from divorce decree being fulfilled?

**By the man:**  Yes  No                      **By the woman:**  Yes  No

If not, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE NOTE:**  
**No application may be accepted until the decree is finalized. It is suggested that no application be submitted within six months of the final decree.**

6. In your own words, please explain why this marriage with your former spouse did not succeed:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Is this former spouse currently remarried?  Yes  No  Unknown

8. Was this former spouse married prior to the marriage with you?  Yes  No

If so, please list names below (include maiden name of each):

A. **FIRST** Spouse: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

If one party was Catholic, did this marriage take place in the Catholic Church?

Yes  No  Does not apply  Unknown

How did the marriage end?  Divorce  Death  Civil Annulment

Date of decree and/or death: \_\_\_\_\_

Place where decree was issued: \_\_\_\_\_

B. **SECOND** Spouse: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

If one party was Catholic, did this marriage take place in the Catholic Church?

Yes  No  Does not apply  Unknown

How did the marriage end?  Divorce  Death  Civil Annulment

Date of decree and/or death: \_\_\_\_\_

Place where decree was issued: \_\_\_\_\_

If there were more than two previous spouses, please list on separate page.