

Archdiocese of Philadelphia  
**Church Ministry Institute**  
222 N. 17<sup>th</sup> Street, Philadelphia, PA 19103  
215-587-0551 Fax: 215-587-3561

**Application Form**

**Name** \_\_\_\_\_  
(Last) (First) (Middle)

**Name for Name Tag** \_\_\_\_\_

**Parish** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Place** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Telephone** (\_\_\_\_) \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Occupation** \_\_\_\_\_ **Business Telephone** (\_\_\_\_) \_\_\_\_\_

**Marital Status** Single \_\_\_\_ Married \_\_\_\_ Widow(er) \_\_\_\_ Separated \_\_\_\_  
Divorced \_\_\_\_ Annulled \_\_\_\_

**Name of Spouse** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Names and Ages of Children** \_\_\_\_\_  
\_\_\_\_\_

**List All Schools Attended** (Elementary, High School, College)

School	Dates of Attendance	Diploma/Degree
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**List Work Experience**

Employer	Job Description	Dates of Employment
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_____	_____	_____
_____	_____	_____
_____	_____	_____

**List all Church Related Activities in which you are currently engaged**

Activity

Parish/Diocese

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**List any Church Related Activities in which you have been previously engaged**

Activity

Parish/Diocese

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**List any Courses or Workshops you have attended** (Theology, Public Relations, Management, Psychology, etc.)

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**List two Personal References** (with address and telephone number)

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**A personal interview will be scheduled for each applicant.**

**If accepted, which Evening / Location would you like to attend?**

**(Class - 7:00PM - 9:30 PM)**

\_\_\_ Tuesday, Bishop Shanahan

\_\_\_ Thursday, St. Charles Seminary

\_\_\_ Wednesday, Lansdale Catholic

\_\_\_ Thursday, Archbishop Ryan

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**To make application, please send the following:**

1. \_\_\_ Completed application form
2. \_\_\_ Typed autobiography - **one page** including significant events in your life, your faith journey, and reason why you wish to attend Church Ministry Institute
3. \_\_\_ Recent picture (alone or with others)
4. \_\_\_ \$25.00 registration fee payable to *Archdiocese of Philadelphia*

\*A letter and questionnaire concerning your application will be sent to your pastor after your application has been returned to this office. Please meet with your pastor, make him aware of your application and that a recommendation will be sent to him.