

# DIOCESE OF YAKIMA



## PRELIMINARY APPLICATION FOR POSSIBLE SEMINARIANS

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*Preliminary Application  
For Possible Seminarians*

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**IV. LEGAL STATUS:**

1. Are you a citizen of the United States? Yes \_\_\_ No \_\_\_

If no, of what country are you a citizen? \_\_\_\_\_

2. Are you a permanent resident of the U.S. (Green Card Holder)? Yes \_\_\_ No \_\_\_

3. Have you ever had any USA visa, for example a tourist visa, even if expired?  
Yes \_\_\_ No \_\_\_

If yes, what kind of visa, for example, a tourist visa? \_\_\_\_\_

What is/was the period of validity of that visa? \_\_\_\_\_

4. Have you ever entered the U.S.A without a visa? Yes \_\_\_ No \_\_\_  
If so, when?

\_\_\_\_\_

5. Have you ever been arrested? Yes \_\_\_ No \_\_\_ Age at time of arrest: \_\_\_\_\_

Place and date of arrest: \_\_\_\_\_  
City County State Date

If so, what were the charges? \_\_\_\_\_

Outcome: \_\_\_\_\_

**V. MILITARY SERVICE:**

1. Have you ever served in the military? Yes \_\_\_ No \_\_\_

Branch of Service: \_\_\_\_\_ Date of Enlistment: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

**VI. FINANCIAL STATUS:**

1. Are you currently in debt (credit cards, bank loans or personal/government/student loans, etc)? Yes \_\_\_ No \_\_\_

If yes, please indicate the amount you owe and to whom it is owed: \_\_\_\_\_

\_\_\_\_\_

2. Do you have a regular income? Yes \_\_\_ No \_\_\_ Annual Estimate: \_\_\_\_\_

**VII. RELIGIOUS BACKGROUND:**

1. List the church-related activities in which you have been engaged in during the last three years:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

2. Have you ever stopped the regular practice of your Catholic Faith? For example, not attending Sunday Mass. Yes \_\_\_ No \_\_\_

If so, for how many months or years? \_\_\_\_\_ Months \_\_\_\_\_ Years

3. Have you ever formally renounced you Catholic Faith? Yes \_\_\_ No \_\_\_

If yes, for how long? \_\_\_\_\_

Why? \_\_\_\_\_

When did you return to the Catholic Church? \_\_\_\_\_

4. Have you ever belonged to a Church or religious body other than the Catholic Church? Yes \_\_\_ No \_\_\_

**VIII. HEALTH BACKGROUND:**

1. Date of last physical examination: \_\_\_\_\_

2. Date of last dental exam: \_\_\_\_\_

3. Date of last eye exam: \_\_\_\_\_

4. Chronic illnesses or permanent disabilities? \_\_\_\_\_

5. If there is any history of mental illness in your immediate, please give details:

\_\_\_\_\_

6. Have you ever been in a treatment program of any kind? Yes \_\_\_ No \_\_\_

If so, list where and when: \_\_\_\_\_

Contact information of the facility: \_\_\_\_\_

\_\_\_\_\_

7. Please list any hospitalizations in the last three (3) years. Give dates and reasons for treatment:
- a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
8. Do you drink alcoholic beverages? Yes \_\_\_ No \_\_\_  
Which one(s)? \_\_\_\_\_ How often? \_\_\_\_\_
9. Do you take prescription medications? Yes \_\_\_ No \_\_\_  
If yes, which ones: \_\_\_\_\_
10. Have you ever been chemically dependent? Yes \_\_\_ No \_\_\_  
Which drugs? \_\_\_\_\_
11. Have you ever been involved in a chemical dependency or substance abuse program?  
Yes \_\_\_ No \_\_\_

**IX. VOCATIONAL CHOICES:**

1. Have you ever applied for admittance to another diocese as a seminarian?  
Yes \_\_\_ No \_\_\_
- | Name of Diocese(s) | Name of Contact | How many Years? |
|--------------------|-----------------|-----------------|
|                    |                 |                 |
| Address(es)        |                 | Telephone(s)    |
| Email              |                 |                 |
- A. If so, were you accepted? Yes \_\_\_ No \_\_\_ What year? \_\_\_\_\_
- B. How long were you a seminarian? \_\_\_\_\_
- C. Ministries Received (eg. lector, acolyte, etc.):
- Acolyte? Yes \_\_\_ No \_\_\_ What year did you receive it? \_\_\_\_\_
- Lector? Yes \_\_\_ No \_\_\_ What year did you receive it? \_\_\_\_\_
- D. Did you leave? Yes \_\_\_ No \_\_\_
- E. Why did you leave? \_\_\_\_\_

2. Have you ever submitted an application to a religious community? Yes \_\_\_ No \_\_\_

A. If yes, which one? Name: \_\_\_\_\_

\_\_\_\_\_  
Address City, State Country

B. Were you accepted? Yes \_\_\_ No \_\_\_ What Year? \_\_\_\_\_

C. Vows Professed? Yes \_\_\_ No \_\_\_ Did they expire? Yes \_\_\_ No \_\_\_

D. Ministries Received (lector, acolyte, etc.):

\_\_\_\_\_  
Which ones? What year did you receive it?

\_\_\_\_\_  
Which ones? What year did you receive it?

\_\_\_\_\_  
Name of Religious Community(ies)

\_\_\_\_\_  
Address(es) Telephone(s)

E. Did you leave the Community? Yes \_\_\_ No \_\_\_ What Year? \_\_\_\_\_

F. If yes, why did you leave? \_\_\_\_\_

**X. VOCATIONAL ATTITUDES:**

1. Which aspects of priestly life do you find most appealing? \_\_\_\_\_

\_\_\_\_\_

2. Which aspects of priestly life do you find most challenging? \_\_\_\_\_

\_\_\_\_\_

3. In one or two sentences comment on the following:

A. Obedience to the Bishop: \_\_\_\_\_

\_\_\_\_\_

B. Personal Prayer: \_\_\_\_\_

\_\_\_\_\_



C. Celibate Chastity: \_\_\_\_\_  
\_\_\_\_\_

D. Women as parish leaders or helpers with Sunday worship: \_\_\_\_\_  
\_\_\_\_\_

E. Having lay people as co-workers: \_\_\_\_\_  
\_\_\_\_\_

F. Ministry to non-English speaking people: \_\_\_\_\_  
\_\_\_\_\_

**XI. MARITAL STATUS:**

1. Have you been married? Yes \_\_\_ No \_\_\_

2. If yes, please provide the following information:

A. Number of years of marriage: \_\_\_\_\_

B. How did the marriage end, death or divorce? \_\_\_\_\_

C. In which diocese did the marriage occur? \_\_\_\_\_

D. List the names and ages of any children:

_____	_____	_____	_____
Name	Age	Name	Age
_____	_____	_____	_____
Name	Age	Name	Age
_____	_____	_____	_____
Name	Age	Name	Age

E. If the marriage ended in divorce, did it ever receive a declaration of nullity from the Catholic Church? Yes \_\_\_ No \_\_\_

F. If yes, in which (Arch) Diocese was this granted? \_\_\_\_\_

Date of Annulment: \_\_\_\_\_

G. In which diocese does your former wife live? \_\_\_\_\_

## XII. CANONICAL STATUS:

The following are canonical impediments which would require a dispensation before ordination, please check where applicable:

- |  |     |    |
|--|-----|----|
| a. Severe mental illness (i.e. have you ever committed yourself or been committed to a psychiatric facility?)  | Yes | No |
| b. Apostasy, heresy or schism (i.e. have you ever publicly abandoned the Catholic Church; have you publicly advocated any views contrary to the teaching of the Catholic Church; have you ever joined another religious body by a formal act?) | Yes | No |
| c. Have you made public religious vows?  | Yes | No |
| d. Have you been involved in the taking of another human life; have you helped someone procure an abortion, performed an abortion or positively cooperated in obtaining an abortion for another person?  | Yes | No |
| e. Have you ever attempted suicide, self-mutilation or mutilation of others?   | Yes | No |
| f. Have you ever impersonated a deacon, priest or bishop?  | Yes | No |
| g. Have you ever been excommunicated?  | Yes | No |

**DOCUMENTS TO BE SENT DIRECTLY TO THE VOCATION DIRECTOR AS SOON AS THEY ARE AVAILABLE, INDIVIDUALLY OR COLLECTIVELY**

1. Birth Certificate
2. Background check: the form is available from the pastor of your parish.
3. Church Documents:
  - A. Recently issued copy of your Baptismal certificate (issued in the last six months by the Church of your baptism).
  - B. Copy of your Confirmation certificate.
  - C. Divorce / Annulment decree if applicable.
4. Education Documents:
  - A. Official copies of all high school, college and graduate school transcripts (Contact each school for an official transcript to be sent directly to Vocation Director).
5. Copy of results of physical examination, including immunization record & HIV testing.
6. Immigration Documents, if applicable:
  - A. Copy of biographical page of your passport.
  - B. Copies of any visas to enter the U.S. you may have received.
  - C. Copies of any I-94 Arrival/Departure cards you may have (front & back)
  - D. Copy of Resident Alien (Green Card)
  - E. Copy of Certificate of U.S. Naturalization or Certificate of U.S. Citizenship.
  - F. Copies of any U.S. immigration-related documents you believe may be helpful to the Vocational Director, (i.e., relative immigrant petitions filed and pending on your behalf, etc.)
7. A total of 3 Letters of Recommendation. One letter from your Parish Pastor.
8. Autobiography (maximum of 6 typed pages)
  - A. What do you believe have been significant relationships, events and milestones in your life until now?
  - B. What do you consider the most meaningful facts of your life? (e.g. family; educational background; significant relationships and friendships; professional/work experiences, etc.)
  - C. Please, also include your thoughts about the following topics: What the priesthood means to me and how I understand living a life of celibate chastity as a priest.

**XIV. REFERENCES:**

Besides the priest you named on page 1, list two people who know you well and can be contacted:

1. \_\_\_\_\_  
Name Occupation  
\_\_\_\_\_  
Address Phone

2. \_\_\_\_\_  
Name Occupation  
\_\_\_\_\_  
Address Phone

**PERMISSION TO RELEASE INFORMATION**

I attest that the information submitted to the Vocation Office pertinent to this Application is true and completed to the best of my knowledge.

I recognize that the information requested by the Vocation Office will be held in the strictest confidence and will become property of the Diocese of Yakima. It will not be accessible to me. I understand that the decision for me to be accepted or not as a seminarian for the Diocese of Yakima will be made at the discretion of the Vocations Director, the Bishop of Yakima, and Seminary Personnel and that there is no obligation on their part to report to me the reasons for any or all decisions regarding this application.

I also agree to authorize the Vocation Director to release any and all information regarding my application to those deemed necessary in the application process.

Should I be accepted as a seminarian for the Diocese of Yakima, I understand that my application documents will become part of a file that will be established in my name and maintained for the duration of my time as a seminarian, This file will be held in confidence and I understand that only those authorized by the Bishop of Yakima or the Vocation Director will have access to its contents.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_