

# *Religious Formation Ministry Programme*

*Loreto House, Dublin, Ireland*

## APPLICATION FORM

Family Name ..... First Name .....

Date of Birth ..... Place of Birth .....

Nationality ..... Gender .....

Congregation / Society / Diocese.....

Initial Formation (if applicable) From ..... To .....

Date of Final Profession / Ordination (if applicable) .....

Present Ministry .....

Address for Correspondence .....

.....

..... Tel. number .....

mobile / cell number..... e-mail:.....

Please list two people from whom recommendation forms can be expected.  
One of these must be your Congregational / Society Leader / Bishop.

Name ..... Name .....

Address ..... Address .....

.....

.....

Position.. ..... Position.....

Tel. number..... Tel. number.....

Mobile/cell. .... Mobile/cell.....

e-mail..... e-mail.....



## MINISTRY

Please give details of all your years in ministry

| DATES | MINISTRY |
|-------|----------|
| _____ | _____    |
| _____ | _____    |
| _____ | _____    |
| _____ | _____    |
| _____ | _____    |
| _____ | _____    |

**ATTACH TO YOUR APPLICATION A REASONABLY FULL LIFE HISTORY, 3 – 4 PAGES IN LENGTH ADDRESSING THE FOLLOWING AREAS IN SOME DETAIL**

- A description of your immediate family and your relationship with the members
- Your educational experience
- Important moments in the adult development of your faith and sense of vocation
- For religious / priest, your experience of formation in novitiate / seminary
- Your experience of relationships in your adult life, significant friendships, how you experience your own sexuality
- Events which you consider had a major impact on your human and spiritual growth
- Your state of physical and emotional health and how you meet relaxation needs
- The model of Church you envisage for the 21<sup>st</sup> century
- The major issues you see facing the Church and world today.
- Your present understanding of religious life, the role of the laity and ordained ministry.
- Your reasons for applying for this Programme, your expectations of what you hope to acquire for leadership / formation ministry / your own personal life.

*Please Return Completed Form to:*

**The Director  
Religious Formation Ministry Programme  
Willow Park, Rock Road  
Blackrock  
Co. Dublin  
IRELAND**

TEL: + 353-1-2107921

*e-mail:* rfmploretohouse@gmail.com

<http://www.loretohouse.com>

YEAR FOR WHICH APPLICATION IS MADE: .....

Signature: .....

Date: .....