

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 21st 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: rfmploretouse@gmail.com

<http://www.lorethouse.com>

YEAR FOR WHICH APPLICATION IS MADE:

Signature:

Date: