

**Diocese of Providence
Office of the Diaconate
Application for Admission to the Program of Formation**

Name _____
Address _____
City/Town _____ State _____ Zip _____
Home Telephone _____ Cell phone No. _____
Email Address _____
Date of Birth _____ Age _____ Soc. Sec. No. _____

Home Parish _____ How long a member? _____
Parish City/Town _____
Pastor _____

Current Employer _____
Place of Employment _____
City/Town _____ State _____ Zip _____
Work Telephone _____ Dates of Employment _____

Spouse's Name _____
Spouse's Address (if different) _____
City/Town _____ State _____ Zip _____
Home Telephone _____ Cell phone No. _____
Email Address _____
Date of Birth _____ Age _____ Soc. Sec. No. _____

Spouse's Current Employer _____
Place of Employment _____
City/Town _____ State _____ Zip _____
Work Telephone _____ Dates of Employment _____

Names and birth dates of children:
& dependents living with you



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You may use additional sheets where necessary.

Applicant's Educational Background:

Grade School Attended: _____

High School _____ Class year _____

College(s) attended

Class year & Degree earned or
Credit hours earned

What Theological studies have you undertaken? _____

Civic organizations _____

Special Skills or Training _____

Do you speak a second language? _____ What Language? _____

Special Talents or Achievements _____

List Apostolic work in which you are currently involved: _____

Is your wife in full agreement with your desire to enter formation to be a
Permanent Deacon? _____



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Applicant's Employment History:

Name & Address	Position held	Dates of Employment
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List names & addresses of priests with whom you have discussed your interest in the diaconate. _____

Please list any "areas of need" in which you feel particularly competent to serve as a deacon. _____

Please make a statement about your health, focusing on any physical or emotional conditions that might limit your Apostolic Activity _____

Signature Date



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Autobiography

You may type or handwrite a concise story of your life. This should include, as a minimum, the following information:

- a) Your early life and family
- b) Your education
- c) Past and present occupations
- d) Military Service
- e) Marriage and family life
- f) Reasons for applying

You may use additional sheets where necessary.

Please return this application no later than July 15, 2021

