



Order of Christian Initiation

Pastor Investigation YOUTH Inquirer Form

PARISH: _____ CITY/TOWN _____

NOTE: This is for youth of ages 18 years old and younger. The information contained in this document should not be the only part of the first meeting with the Inquirer. The Christian Initiation coordinator should meet with the Inquirer and the Parents and/or Guardians first, to become acquainted and to inform every one of the necessary information that will need to be provided. The forms should be completed by the adults at a following meeting. Proof of baptism will have to be supplied in the form of a formal baptismal certificate. The gathering of the information in this document should not be delayed. Any youth seeking to enter the process of OCIA on their own, without being accompanied by a Parent/Guardian will need to have a Letter of Permission from them, to be given to the Pastor/Administrator. The YOUTH will need to be accompanied by an adult sponsor (fully initiated Catholic in good standing, over the age of 18). The Pastor/Administrator must sign this form. A copy of this form is to be submitted to the Office of Christian Initiation: Diocese of Altoona-Johnstown, 2713 West Chestnut Avenue, Altoona, PA 16601 before the celebration of the first formal Minor Ritual. **POTENTIAL Catechumen** ___ **Candidate** ___

| | | | |
|---------------------------------|----------------|------------------------------|----------------|
| Today's date | | | |
| Name | | | |
| | <i>Last</i> | <i>First</i> | <i>Middle</i> |
| | | | |
| Home address | Street Address | | City/Town |
| | | | Zip Code |
| Date of birth | | | |
| Place of birth | | | |
| | <i>Town</i> | <i>State/Province</i> | <i>Country</i> |
| Home phone of Parent (s) | | Cell phone of Parents | |
| Email of Parent (s) | | | |
| School of Enrollment | | | |
| Grade level in school | | | |

B. FAMILY

| List the name(s) of Parents (Step parents, etc.) | List Address if different than Youth. | | |
|---|---------------------------------------|--|-------|
| Relationship | Resides with (Yes or No) | | |
| Name (Father) | | | Phone |
| Currently in OCIA process: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Name (Mother including Maiden Name) | | | |
| Currently in OCIA process <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

C. RELIGIOUS HISTORY

| | | |
|---|---|--|
| Present or previous religious affiliation (if any) | | |
| Baptism | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <i>If answered "Yes", please provide a BAPTISM RECORD and the following information</i> | |
| | Denomination in which he/she was Baptized | |
| | Date of Baptism | |
| | Age at Baptism | |
| | Baptism name (if different from current name) | |
| | Place of Baptism (church name) | |
| | Address of place of Baptism | |

If Baptized as a Catholic, check those sacraments inquirer has already received:

First Penance First Eucharist Confirmation
 Church: _____ Church: _____ Church: _____

D. STATUS OF PARENT (S) AT TIME OF BAPTISM

| | | |
|--|--|--|
| <input type="checkbox"/> Parent (Natural) <input type="checkbox"/> Adoptive Parents | Name of Father | |
| | Father's religious affiliation (if any) | |
| | Name of Mother (legal with Maiden Name) | |
| | Mother's religious affiliation (if any) | |
| <input type="checkbox"/> Legal Guardian if other than Parent (s) | Name of Guardian | |
| | Guardian religious affiliation (if any) | |
| | Mother's religious affiliation (if any) | |
| | Name of Guardian | |
| | Guardian religious affiliation (if any) | |
| | Father's religious affiliation (if any) | |

ADDITIONAL NOTES FOR PARISH

If necessary: Has Letter of Permission been given: Yes No

Has baptismal certificate been provided: Yes No

Previous religious instruction Youth has had: _____

Siblings and their ages: _____

Special talents and interests: _____

Preferred Learning style of Youth: _____

Possible accommodations for Persons of Disability: _____

E. SPONSOR/GODPARENT

Name: _____

Address: _____

Parish of Registration: _____

Address: _____

Provided Certificate of Eligibility if other than parish of OCIA process.

NOTES FOR DIRECTOR/COORDINATORS

Parents/Guardians should always be invited to participate in the OCIA process. However, Youth should not be held back due to the non-involvement of the parent/guardian. Sponsors/Godparents must be active participants.

Siblings of the Inquirer also in the OCIA process need to have their own individual form completed.

If the inquirer is living with in a partial custody relationship due to divorce/separation status of the parents, a letter of permission is also necessary for the youth from the other parent. In no way should the celebration of sacraments seemed to be forced or coerced in any situation. This would lead to a non-valid reception of the sacrament.

If the inquirer was baptized in an Orthodox or Eastern Catholic church, there are special concerns. Please refer to the Office of the Tribunal for direction.

If an older Teen has a marital history, please use the Pastor Investigation ADULT Inquirer Form.

FOR CANONICAL ADVICE, PLEASE CONTACT:

**OFFICE OF THE TRIBUNAL
DIOCESE OF ALTOONA- JOHNSTOWN
2713 WEST CHESTNUT AVENUE
ALTOONA, PA 16601-1720
814-317-2649**

DATE: _____ Date: Rite of Entrance (Catechumen) _____

Date: Rite of Welcoming (Candidate) _____

PARISH NAME: _____

ADDRESS: _____

NAME: _____

Please print: Pastor/Administrator

Signature of Pastor/Administrator