**ARCHDIOCESE OF LOUISVILLE Privilege of the Faith/Pauline Cases**

# THE TRIBUNAL

**This questionnaire is to be used for inquiries concerning a Privilege of the Faith Marriage and Pauline Privilege cases. It is absolutely essential that all factual information be given as requested and all questions answered in detail. Omissions or lack of details will result in this questionnaire being returned. ANSWERS MUST BE TYPED OR IN CLEARLY LEGIBLE BLACK INK. (NB: Minister is to keep a copy of completed questionnaire.)**

 PETITIONER - PRINCIPAL RESPONDENT - the other party

 person seeking dissolution to the marriage (former spouse)

 Full Present Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Maiden Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Work Telephone Number Home Work\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-Mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Place of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \*Date of Baptism \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Denomination \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name & Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 of

 Church of Baptism \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Present Religion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Marriage Witnessed by: a) Catholic Priest c) Non-Catholic

 (circle one) b) Civil Official Minister

Place of Marriage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City County State Name & Address of Church, if any

\* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \*

Date of Final Separation (when you last lived together) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Civil divorce/dissolution/annulment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date City County State

**COPIES OF MARRIAGE CERTIFICATE, DIVORCE RECORDS AND OTHER PERTINENT DOCUMENTS -**

**(CURRENT BAPTISMAL CERTIFICATES FOR PETITIONER, FOR ANY CHILDREN BORN OF THIS UNION AND FOR THE PROPOSED OR PRESENT SPOUSE), MUST BE SUBMITTED WITH THIS QUESTIONNAIRE.**

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REGARDING YOURSELF

1. Please give your father's name and your mother's maiden name:

 FATHER: MOTHER:

2. What religion did your parents profess at the time of your birth and early childhood?

 FATHER: MOTHER:

3. Did your father or mother, or anyone else, have you baptized, christened or sprinkled during your infancy or early childhood either by sprinkling, immersion or infusion?

4. If so, when and where?

5. How and when did you find this out?

**(IF BAPTIZED IN INFANCY OR CHILDHOOD, PLEASE SKIP TO QUESTION 18)**

6. Did your parents regularly attend church services during your infancy and early childhood?

7. If so, please list the names of churches, denominations, complete addresses and the years attended.

 NAME OF CHURCH DENOMINATION COMPLETE ADDRESS YEARS

 19 - 19

 19 - 19

 19 - 19

8. Were you always in the care of your parents during infancy and childhood?

9. If not, in whose care were you placed and at what age?

10. Give the names of your brothers and sisters according to age, beginning with the oldest and including your own name in its proper place.

 1. 2. 3. 4.

 5. 6. 7. 8.

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11. Have any of your brothers or sisters ever been baptized or sprinkled? If so, which ones, at what age, and in which church were they baptized?

12. If some of your brothers or sisters were baptized, how do you explain that you were not baptized?

13. Were you ever baptized or sprinkled on your own accord later in life, either before or after you married ?

 (Respondent’s name)

14. If so, when and where?

15. Have you ever belonged to or did you attend church or Sunday School more or less regularly? If so, please list:

 NAME OF CHURCH DENOMINATION COMPLETE ADDRESS YEARS

 19 - 19

 19 - 19

 19 - 19

16. How do you explain that you were not baptized or sprinkled in any of the churches listed above?

17. Have you ever been seriously ill and unconscious in any hospital where it is possible you might have been baptized in that condition? If so, please explain.

REGARDING YOUR FORMER SPOUSE

18. Please give the respondent's father's name and mother's maiden name:

 FATHER: MOTHER:

19. What religion did his/her parents profess at the time of his/her birth and early childhood?

 FATHER: MOTHER:

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20. Do you know whether or not has ever been baptized or

 (Respondent’s name)

 sprinkled? Please explain.

21. What churches, if any, did or his/her parents attend?

 (Respondent’s name)

 NAME OF CHURCH DENOMINATION COMPLETE ADDRESS YEARS

 19 - 19

 19 - 19

 19 - 19

22. Was the marriage to your first marriage?

 (Respondent’s name)

Start with the earliest marriage and end with your current marriage.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Marriage Number** | Name of Spouse | **Marital status of spouse at time of marriage to you (i.e. never married, divorced, etc.)** | **Religion of spouse** | **Date of Marriage & City/State marriage occurred** | Date & City/State of divorce |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |

23. As far as you know, was this first marriage?

 (Respondent’s name)

Please list the following information for all of his/her marriages. Start with the earliest marriage and end with the current marriage.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Marriage Number** | **Name of Spouse**  | **Marital status of spouse at time of marriage to respondent (i.e. never married, divorced, etc.)** | **Religion of spouse** | **Date of Marriage and****City/State marriage occurred**  | Date and City/State of divorce |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |

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CONCERNING THE MARRIAGE

26. Were you both faithful to each other? (Please elaborate).

27. Did either of you have any conditions or reservations about marriage itself or about your relationship before you got married?

28. What was your daily married life like?

29. Any major problems during the married life?

30. Were you basically happy in the early part of your marriage together?

31. WHEN or over what did problems first arise in the marriage?

32. What were your main complaints regarding as a spouse and/or parent? (Respondent’s name)

33. What were his/her main complaints about you as a spouse and/or parent?

34. How long did you and live together before you separated for the last time? (Respondent’s name)

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35. Given the length of your common life, why did you stay together for that length of time?

36. WHEN and over what did the first separation occur?

37. WHEN did the final separation take place?

38. Please give details of any other separations; date and what brought you back together?

39. When were statements first made, after the marriage, about a possible divorce?

40. Who initiated and obtained the civil divorce or dissolution? On what civil grounds was it granted?

41. What was the exact cause of your separation? **Please describe in detail.**

42. Did you and live together as husband and wife after the final separation? (Respondent’s name)

43. Is there any hope of reconciliation between you and ? If not, why not? (Respondent’s name)

 Privilege Cases

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44. Has remarried? If so, please give name, religion and

 (Respondent’s name)

 marital status for this person?

41. Have you remarried? If so, please list the name, date of marriage and religion? (If more than one remarriage, please list same information for all subsequent marriages).

42. If you have not remarried but are planning to do so, please give name, religion and marital status of proposed spouse.

43. If present/proposed spouse has been baptized, please give date and place of baptism.

44. How and WHEN did you first meet your present/proposed spouse? Please give details.

45. Was present/proposed spouse in any way the cause of your separation from

 ? **Why do you say this**?

 (Respondent’s name)

46. Has present/proposed spouse been married before? If so, to whom, when and where?

47. Is present/proposed spouse free to marry?

48. Do you have any children? From which marriage?

49. How many children do you have?

50. If children were born of your marriage to , who received custody? Have there been any changes in custody? (Respondent’s Name)

 Privilege Cases

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51. How old are your children?

 1. (age) 2. (age)

 3. (age) 4. (age)

 5. (age) 6. (age)

52. Have they all been baptized? When? Where?

 1. (When) (Where)

 2. (When) (Where)

 3. (When) (Where)

 4. (When) (Where)

 5. (When) (Where)

 6. (When) (Where)

53. Are they attending Catholic School?

1. Are they receiving the Sacraments of Penance and Holy Eucharist?

55. If you are non-baptized, do you now wish to become a baptized person?

56. Are you interested in becoming a member of the Catholic Church?

57. When and how did you first become interested in joining the Catholic Church?

58. How long and by whom were you instructed?

59. Do you believe that the Catholic Church is the church founded by Christ?

60. Since taking instructions, have you been attending Mass regularly on Sundays and Holy Days?

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61. Could you and (present spouse) separate from each other without detriment to the children's welfare until the Holy See gives a decision in your case?

1. Why, in your own words, are you asking the Holy Father to dissolve your marriage to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_? (Please be thorough in your request).

 (Respondent’s name)

63. Please give us the names and addresses of two persons, preferably members of the non-baptized person's family or people who knew him/her well as he/she was growing up who would be knowledgeable about his/her baptismal status and willing to serve as witnesses in the case. In Pauline cases, both parties need to submit the names and addresses of two witnesses.

 NAME: NAME:

 ADDRESS: ADDRESS:

 CITY, STATE CITY, STATE

 ZIP CODE: ZIP CODE:

 RELATIONSHIP: RELATIONSHIP:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 NAME: NAME:

 ADDRESS: ADDRESS:

 CITY, STATE CITY, STATE

 ZIP CODE: ZIP CODE:

 RELATIONSHIP: RELATIONSHIP:

 Privilege Cases

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64. Have you anything to add, suppress or change in the testimony you have given?

65. Do you affirm the truthfulness of all your statements to the best of your knowledge and belief?

 DATE SIGNATURE OF PETITIONER

 PLACE SIGNATURE OF PRIEST/AUDITOR

Opinion of Priest/Auditor on credibility of petitioner and his/her testimony.