

CLERGY INFORMATION SHEET

Date: _____

NAME:	PARISH/MISSION:
SOCIAL SECURITY:	
RESIDENCE:	ADDRESS:
TELEPHONE:	TELEPHONE:
CELL PHONE:	
FAX NUMBER:	FAX NUMBER:
E-MAIL:	E-MAIL:
CLERGY DATE OF BIRTH:	RECTOR/VICAR AS OF DATE:
ORDINATION TO DIACONATE:	DIOCESE:
ORDINATION TO PRIESTHOOD:	DIOCESE:
SPOUSE'S NAME:	SPOUSE DATE OF BIRTH:
DATE OF MARRIAGE:	OCCUPATION:
CHILDREN:	DATE OF BIRTH:
	DATE OF BIRTH:
	DATE OF BIRTH:
	DATE OF BIRTH:
	DATE OF BIRTH:

Priestly Skills/Special Training: _____

Physical Health: (Comments as to any past history of physical difficulties) _____

Hobbies/Interests: _____

Other information: Do you have a will? _____

Where is it kept? _____

Executor: _____

Address: _____

In case of emergency contact: _____

Relationship: _____

Address: _____

Telephone number: _____