 [Diocesan Address Details]

RCIA Youth Inquirer Information Form (13-17 year old)

Information on this form is held in confidence and is not shared without your permission.

 Today’s Date:

Name of Person completing this form:

First Name of Youth: Middle: Last:

Maiden Name *(if applicable)*:

Date of Birth: Age:

Place of Birth:

 *(Include locality: town, city, and country)*

Year Level: School:

Is there a parish that you or your family are associated? □ yes □ no

If you answered “yes” please name the parish:

# PARENT/GUARDIAN INFORMATION

List below the name(s) of parent(s)/guardian(s) and present religious affiliation, if any:

Name: Relationship:

Religious Affiliation:

Telephone: *(Daytime)* *(Evening/Weekend)*

Cell/Mobile Phone: Email:

Name: Relationship:

Religious Affiliation:

Full Mailing Address:

Suburb: City: Post Code:

Telephone: *(Daytime) (Evening/Weekend)*

Cell/Mobile Phone: Email:

You/youth live with: □ Parents □ Mother only □ Father only □ Other *(please explain)*:

If you/youth live with one parent/guardian, please indicate who has legal custody and/or if you/youth also live with a step-parent: □ Parent □ Guardian □ Step-parent

If there is a joint custody arrangement, please provide alternate full address:

Suburb: City: Post Code:

If being completed by you/youth, are your parents aware of your interest in the Catholic Church?

# RELIGIOUS HISTORY

Have you/youth ever been baptized? □ Yes □ No □ I am not sure

*If you answered “yes” to the question above, please provide the following information:*

* In what denomination were you/youth baptized?:
* Date or approximate age when baptism took place?:
* Baptismal name *(if different from current name)*:
* Place of Baptism *(name of church/denomination)*:
* Address, if known:
* Location, if known:

 *(Include locality: town, city, and country)*

If you/youth were baptized as a Catholic, check those sacraments you/youth have received.

□ Penance (Confession) □ Eucharist (Holy Communion) □ Confirmation

Have you/youth been married or are currently married?

□ Never been married □ Is currently married □ Has been married

# GENERAL QUESTIONS (OPTIONAL)

The following information will assist us in helping to personalize your journey. Please fill in what you are comfortable in sharing.

* What contact have you/youth had with the Catholic Church to date?

* Describe the types of religious education in which you/youth have participated.

* What are some of the questions or concerns you/youth have about the Catholic Church?

* Summarize below the reason(s) you/youth desire to begin the Christian initiation process.

* Do you have friends who are Catholic?

# LEARNING STYLE

Not all people learn in the same way. You can help to guide you in this process as possible by sharing about your/youth’s learning abilities.

* In what ways do you think you/youth enjoy learning?
* Listen *(lecture; storytelling)*:

* Seeing *(looking at pictures; identifying symbols; watching a video)*:

* Reading *(At what level does you/youth read? Do you enjoy reading?)*:

* Writing *(How are your/youth’s writing skills? Do you/youth like to write stories/keep a journal?)*:

* Hands on *(Do you/youth enjoy doing projects or creating things?)*:

* Group Work *(Do you/youth enjoy working with others or prefer to work alone?)*:

* It will help to know your/youth’s strongest attributes and challenges. Please add below any helpful details that you think would be relevant.

*For example: “Aaron is very outgoing and gets excited when he is having fun. He becomes quiet when he doesn’t understand something. He works well with others. Aaron has a 30% hearing loss in his left ear. He may not hear you if you are standing behind him and speaking normally.”*

# FAMILY INFORMATION (OPTIONAL)

*List the name(s) of any siblings (e.g. John – brother; Jean – stepsister).*

Relationship: Name: Age:

Relationship: Name: Age:

Relationship: Name: Age:

Relationship: Name: Age:

Relationship: Name: Age:

Date Parish/School Received: By Whom:

Copy of Baptism Certificate Received: Candidate:

Follow-up: