



MOST HOLY TRINITY SEMINARY

1000 Spring Lake Highway, Brooksville, Florida 34602

Telephone: 352 799 0541 Fax: 352 799 0548 e-mail: bpsanborn2002@yahoo.com

APPLICATION FOR ENTRANCE

All information of a personal nature shall be kept confidential.

1. GIVE FULL NAME. (first, middle, last)

2. GIVE COMPLETE CURRENT ADDRESS, TELEPHONE NUMBER, AND E-MAIL ADDRESS, IF YOU HAVE ONE.

OF WHAT COUNTRY ARE YOU A CITIZEN? _____

3. GIVE DATE AND PLACE OF BIRTH.

HEIGHT _____ WEIGHT _____

4. GIVE DATE AND PLACE OF CATHOLIC BAPTISM.

Are you a convert to the Faith? _____

If yes, did you make an abjuration of error? _____ Were you conditionally
baptized? _____

5. GIVE DATE AND PLACE OF CONFIRMATION.

Classical Greek	_____	Read	Write	Speak
French	_____	Read	Write	Speak
German	_____	Read	Write	Speak
Italian	_____	Read	Write	Speak
Other _____	_____	Read	Write	Speak

9. GIVE KNOWLEDGE OF MUSICAL INSTRUMENTS, IF ANY. (Indicate instrument, and show proficiency by indicating *beginner, intermediate, or advanced*).

10. WHERE ARE YOU NOW ATTENDING MASS?

11. WHICH PRIEST(S) SAY(S) MASS REGULARLY AT THE PLACE AT WHICH YOU ATTEND MASS?

12. WHEN DID YOU BEGIN TO ATTEND THE TRADITIONAL LATIN MASS?

13. FOR HOW LONG HAVE YOU THOUGHT OF BECOMING A PRIEST?

14. STATE REASON(S) FOR DESIRING TO BE A PRIEST.

15. HAVE YOU EVER BEEN IN A SEMINARY, MONASTERY, OR OTHER RELIGIOUS INSTITUTION? _____

If yes, please indicate where and when, starting with the most recent. Indicate reasons for leaving.

16. HAVE YOU EVER RECEIVED TONSURE, MINOR ORDERS, OR MAJOR ORDERS? _____

If yes, state which you have received, when, and from what bishop.

17. HAVE YOU EVER TAKEN PUBLIC VOWS? _____

18. HAVE YOU EVER BEEN MARRIED, OR ATTEMPTED MARRIAGE CIVILLY? _____

19. DO YOU HAVE ANY DEBTS OR OBLIGATIONS, FINANCIAL OR OTHERWISE, WHICH WOULD INTERFERE WITH YOUR
FUNCTIONING AS A SEMINARIAN OR A PRIEST? _____

If yes, explain.

Do you have any outstanding student loans, mortgages, car loans, or credit card debt? _____

20. HAVE YOU EVER BEEN ARRESTED? _____

21. HAVE YOU EVER SPENT TIME IN JAIL OR PRISON? _____

22. HAVE YOU EVER BEEN IN THE MILITARY? _____

If yes, give years, branch of service, rank, and date of discharge.

25. ARE YOU IN GOOD HEALTH? _____

Do you have any of the following physical disorders?

Epilepsy _____ Diabetes _____ Hypoglycemia _____

Heart disease _____ Sleeping disorders _____

If yes, explain.

24. HAVE YOU EVER BEEN TREATED FOR PSYCHOLOGICAL DISORDERS, INCLUDING DEPRESSION, BI-POLARISM, SCHIZOPHRENIA, ALCOHOLISM, OR DRUG ADDICTION? _____

If yes, explain.

25. HAVE YOU EVER BEEN HOSPITALIZED? _____

If yes, when, and for what?

26. DO YOU HAVE PERSONAL HEALTH INSURANCE? _____

27. OTHER INFORMATION YOU WOULD LIKE TO PROVIDE.

PLEASE READ CAREFULLY BEFORE SIGNING:

I, the undersigned, declare that the information which I have provided in this application is true. I further represent that I know of no hindrance or impediment, whether physical, mental, moral or otherwise which would render me unsuitable for the seminary or the priesthood.

Signature of applicant

Date

SUPPORTING DOCUMENTS

The following documents must be provided with this application. All sacramental documents must be originals, i.e., ones obtained from the church in which the sacrament was conferred, bearing the seal of that church, and issued not more than six months before the submission of this application. Other documents may be photocopied.

1. BAPTISMAL CERTIFICATE
2. CONFIRMATION CERTIFICATE
3. CERTIFICATE OF THE CATHOLIC MARRIAGE OF YOUR PARENTS (A copy certified by a notary would be sufficient in this case).
4. A RECENT PHOTOGRAPH of yourself.
- 5 DIPLOMAS, CERTIFICATES, LICENSES etc. achieved through education.
6. TRANSCRIPTS from your most recent educational institution. (all years which you attended)
7. LETTER OF RECOMMENDATION from the priest who says Mass at your Mass center. (If this is impossible, then a letter of recommendation from any priest who has known you for more than a year. If this, in turn, is impossible, then a letter of recommendation from a responsible lay person, not related to you, who has known you for at least a year.)
8. CERTIFICATE(S) OF RECEPTION OF MAJOR OR MINOR ORDERS, including tonsure, if you have received any of these.
9. DISCHARGE DOCUMENTS from the military, if applicable.