

MINISTRIES OR POSITIONS

Please list your last four ministries or positions beginning with the most recent.

Position	From	To

FAMILY RELATIONSHIPS

How many brothers and sisters do you have? Brothers _____ Sisters _____

Are you married? _____ Spouse's name _____

If you have children please give names and ages: _____

Religious Congregation _____ Initials _____

Diocese _____

In case of emergency, contact _____

PERSONAL GOALS

Please describe the personal goals you would hope to achieve during your time with us:

SIGNATURE: _____

Please **sign** your application form and send a \$50 application fee payable to SAT.