



APPLICATION  
Ministry of Pastoral Administrator  
Diocese of Buffalo

Name \_\_\_\_\_  
(if appropriate, include maiden name)

Address \_\_\_\_\_  
\_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (cell) \_\_\_\_\_

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

Present Parish \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Name of Pastor/Pastoral Administrator \_\_\_\_\_

Name and address of pastor/pastoral administrator/ministry supervisor completing the Pastoral Leadership Recommendation:

\_\_\_\_\_

(include title)

\_\_\_\_\_

**Personal Information**

A. **IF MARRIED**, what is the date and place of your marriage: \_\_\_\_\_

Spouse's full name \_\_\_\_\_  
(include maiden name)

**IF MARRIED**, is that marriage able to be recognized as valid by the Catholic Church?

**IF** this is **NOT** your first marriage, have you received declaration(s) of church annulment? \_\_\_\_\_

Does your spouse/family support your vocation to parish ministry? \_\_\_\_\_

B. **IF** a member of a **RELIGIOUS COMMUNITY**,

**Name of Community** \_\_\_\_\_ **Date of Profession** \_\_\_\_\_

If you have been a fully professed member of a religious institute/society of apostolic life but are no longer, have you obtained an indult of separation? \_\_\_\_\_

C. **IF** you have been ordained to the Permanent Diaconate, **Date of Ordination** \_\_\_\_\_

**Educational Background**

A. Names of Schools/Dates Degree Specialization

High School \_\_\_\_\_

Bachelors \_\_\_\_\_

Masters \_\_\_\_\_

\_\_\_\_\_

Other \_\_\_\_\_

B. List any honors you have received in or out of school.

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

**Theology/Ministry Formation**

(Workshops, Institutes, Catechist Formation, Formation for Ministry, Courses in Theology or other topics in ministry)

Topic Sponsoring Agency Year

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

Are you conversant in a language(s) other than English? \_\_\_ yes \_\_\_ no

If yes, what? \_\_\_\_\_

**Employment and Ministry Experience**

A. List gainful employment, **other than Church ministry** beginning with the present:

Employer	Dates	position/kind of work	reason for change
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Address	Person whom we may contact, position	telephone #
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Employer	Dates	position/kind of work	reason for change
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Address	Person whom we may contact, position	telephone #
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Employer	Dates	position/kind of work	reason for change
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Address	Person whom we may contact, position	telephone #
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B. **List ministry and experience** (volunteer, as well as any full time ecclesial)  
 (Please include significant non-church volunteer experience, as well)

Parish/Agency	Dates	Area of Ministry
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Address	Ministry supervisor (i.e. pastor/pastoral administrator, pastoral associate, DRE)	telephone #
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Parish/Agency	Dates	Area of Ministry
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Parish/Agency	Dates	Area of Ministry
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Address	Ministry supervisor (i.e. pastor/pastoral administrator, pastoral associate, DRE)	telephone #
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**Legal History**

A. Have you ever been convicted of, or are you currently under indictment for a crime with the exception of a traffic offense? \_\_\_ yes \_\_\_ no Date \_\_\_\_\_ Please explain: \_\_\_\_\_

If yes, state charge and disposition \_\_\_\_\_

B. Are you now or have you ever been the subject of an indicated report of child abuse, neglect or maltreatment? \_\_\_ yes \_\_\_ no Date \_\_\_\_\_ Please explain: \_\_\_\_\_

Your answer is evaluated based on the nature, severity and date of the offense. No applicant will be excluded from consideration of employment due to prior arrests.

If you are a resident of another diocese, why have you applied to the Buffalo Diocese?

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**Health History** (please answer on a voluntary basis only)

A. In general, describe your overall health: \_\_\_\_\_

\_\_\_\_\_

B. Do you have any specific chronic health conditions? \_\_\_ yes \_\_\_ no  
If so, how is it controlled? \_\_\_\_\_

**I understand that I am subject to a thorough background check including criminal history, driving record, drug testing and credit history. If accepted as a candidate, I will also be required to comply with the Safe Environment Mandates of the Diocese.**

**Signature of applicant** \_\_\_\_\_

Date \_\_\_\_\_