

DIOCESE OF LITTLE ROCK

APPLICATION FOR TRIBUNAL FIELD ADVOCATES

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Work _____ Pager/Cell _____

Email address _____

Occupation: _____ How long? _____

Date of Birth: _____ Parish: _____

- Marital Status:
- Single
 - Married (in Catholic Church? Yes_____/ No ____) How long? _____
 - Number of children _____
 - Widowed
 - Divorced
 - Annulment
 - Remarried

Educational Background (Include high school and date graduation):

Earned Degree *School* *City/State* *Year(s) attended/ date(s) of degree*

Are you familiar with computers? _____ E-mail? _____

Please list no more than *three* current parish or community activities you are actively involved with:

Do you or a family member have an annulment case pending in the Tribunal? If yes, please explain.

If your marriage case is no longer pending, how and when was it resolved? (i.e. Was it granted? When?)

What is your knowledge of the annulment process?

What is your opinion of the annulment process?

Why are you interested in becoming a Field Advocate and what gifts do you think you can bring to this ministry?

What is your understanding of the Church's teaching on marriage?

Signature

Date

* When you have completed each question, please return this application to the Tribunal Office, Diocese of Little Rock, P.O. Box 7565, Little Rock, AR 72217-7565.