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**PAULINE PRIVILEGE**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PP # \_\_\_\_\_\_\_ - 08\_\_\_\_\_**

The **Petitioner** informed of the sanctity of an oath answers:

 **I. PETITIONER AND RESPONDENT INFORMATION**

**PETITIONER:**

1. Complete Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.
 Daytime Phone / Email: Click here to enter text.

 Place /Date of Birth: Click here to enter text.

2. Your Father's Name: Click here to enter text.

 Address of Father: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone / Email: Click here to enter text.

3. Your Mother's Full Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone / Email: Click here to enter text.

**RESPONDENT:**

4. Complete Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Daytime Phone / Email: Click here to enter text.

 Place / Date of Birth: Click here to enter text.

5. Resp’s Father Name: Click here to enter text.

 Address of Father: Click here to enter text.

 City/St/Z: Click here to enter text.

Daytime Phone / Email: Click here to enter text.

6. Resp’ Mother’s Full Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

Daytime Phone / Email: Click here to enter text.

**II. PETITIONER’S HISTORY AND FAMILY BACKGROUND**

1. a) What was your father’s religion at the time of your birth, during your childhood and youth?
(specific denomination)

Click here to enter text.

 b) Did he actively practice his religion?

Click here to enter text.

 c) If he did, please provide the following information

Name of the Church: Click here to enter text.

 Address: Click here to enter text.

 How long attended: Click here to enter text.

 Name of the Church: Click here to enter text.

 Address: Click here to enter text.

 How long attended: Click here to enter text.

d) Did he believe in baptism? Please explain:

Click here to enter text.

e) Was he baptized or christened? How do you know this?

Click here to enter text.

f) Did he believe in the necessity of baptism?

Click here to enter text.

2. a) What was your mother’s religion at the time of your birth, during your childhood and
 youth? (specific denomination)

Click here to enter text.

b) Did she actively practice her religion?

Click here to enter text.

c) If she did, please provide the following information

Name of the Church: Click here to enter text.

 Address: Click here to enter text.

 How long attended: Click here to enter text.

 Name of the Church: Click here to enter text.

 Address: Click here to enter text.

 How long attended: Click here to enter text.

d) Did she believe in baptism? Please explain:

Click here to enter text.

e) Was she baptized or christened? How do you know this?

Click here to enter text.

f) Did she believe in the necessity of baptism?

Click here to enter text.

3. Were you ever baptized, christened, sprinkled, dedicated or initiated in any religious denomination prior to or during your marriage to your former spouse? Yes / No:

Click here to enter text.

a) If yes, in what specific denomination? Click here to enter text.

b) When? Click here to enter text.

c) Church Name: Click here to enter text.
 Phone: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

d) What proof do you have of this? Click here to enter text.

4. Were you ever under the care of guardians or others besides your parents? If yes, please explain:

Click here to enter text.

1. Under whose care and when?

Click here to enter text.

b) What was your age during that period?

Click here to enter text.

c) What was the denomination of the establishment or persons who cared for you?

Click here to enter text.

d) What is the name and address of the churches which they attended?

Church Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

e) Did they believe in the necessity of baptism? Yes / No:

Click here to enter text.

f) During this period could you have been baptized, sprinkled, dedicated, or initiated in any
 religious denomination or sect?

Yes / No: Click here to enter text.
 Please explain:

Click here to enter text.

5. Do you have siblings? Yes / No Click here to enter text.

Please provide the information below:

Name: Click here to enter text.
 Birthdate: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Baptized? Click here to enter text.
 Church: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Name: Click here to enter text.
 Birthdate: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Baptized? Click here to enter text.
 Church: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Name: Click here to enter text.
 Birthdate: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Baptized? Click here to enter text.
 Church: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

6. If some of your siblings/relatives were baptized, but you were not, please explain the reason for the difference:

Click here to enter text.

7. Were you ever seriously sick when you might have been baptized without you knowledge?

 Yes / No:

Click here to enter text.

8. How do you know you were never baptized during your childhood? Who told you and on what occasion?

Click here to enter text.

9. What church(s) have you attended either as a child, youth or adult? *(Include Sunday school or classes in a religious institution)*

 Church: Click here to enter text.
 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Phone: Click here to enter text.
How long attended: Click here to enter text.

 Church: Click here to enter text.
 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Phone: Click here to enter text.
How long attended: Click here to enter text.

10. Who can support your statement that you were not baptized?

 Witness Name: Click here to enter text.

 Relationship: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 E-mail: Click here to enter text.

 Phone: Click here to enter text.

 Witness Name: Click here to enter text.

 Relationship: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

E-mail: Click here to enter text.

 Phone: Click here to enter text.

**III. RESPONDENT’S HISTORY AND FAMILY BACKGROUND**

1. Were you ever baptized, christened, sprinkled, dedicated or initiated in any religious denomination prior to or during your marriage to your former spouse? Yes / No:

Click here to enter text.

a) If yes, in what specific denomination? Click here to enter text.

b) When? Click here to enter text.

c) Church Name: Click here to enter text.
 Phone: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

d) What proof do you have of this? Click here to enter text.

2. If your former spouse was never baptized, christened, dedicated at any time prior to the
breakup of your marriage:

a) How do you know this?

Click here to enter text.

b) Who could testify concerning your former spouse’s **non-**baptism.

 Witness Name: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Relationship to Respondent: Click here to enter text.

 Witness Name: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Daytime Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Relationship to Respondent: Click here to enter text.

3. Please give names and contact information for any siblings of your former spouse.

Name: Click here to enter text.
 Birthdate: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Baptized? Click here to enter text.
 Church: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Name: Click here to enter text.
 Birthdate: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Baptized? Click here to enter text.
 Church: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Name: Click here to enter text.
 Birthdate: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.
 E-mail: Click here to enter text.

 Baptized? Click here to enter text.
 Church: Click here to enter text.

 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

4. Please provide names and addresses of any churches that your former spouse attended as a child, youth or adult. *(Include Sunday school or classes in a religious institution)*

 Church: Click here to enter text.
 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Phone: Click here to enter text.
How long attended: Click here to enter text.

 Church: Click here to enter text.
 Address: Click here to enter text.
 City/St/Z: Click here to enter text.

Phone: Click here to enter text.
How long attended: Click here to enter text.

\*\* Please insert extra page if needed \*\*

5. Would your former spouse be reliable and truthful in giving testimony in this case?

 Click here to enter text.

**IV. MARRIAGE**

1. Marriage Date: Click here to enter text.

 County: Click here to enter text.
 City/St: Click here to enter text.

2. Was this the first marriage for both of you?
 Yes / No: Click here to enter text.

3. How long did you date / keep company with your former spouse before marriage?

Click here to enter text.

4. How long did you live with your former spouse in marriage?

Click here to enter text.

5. Were both you and your former spouse free to marry?

Click here to enter text.

6. Did you both marry with the intentions of
 a) being faithful? Click here to enter text.

 b) marriage being permanent? Click here to enter text.

 c) having children? Click here to enter text.

**V. DIVORCE AND RE-MARRIAGE**

1. If there were any temporary separations, please give their number and duration:

Click here to enter text.

2. When was the final separation?

Click here to enter text.

3. What caused the final separation?

Click here to enter text.

4. Has there been a civil divorce? Click here to enter text.

If yes, please answer:

 a) Who filed? Click here to enter text.

 b) Where obtained: Click here to enter text.
 c) Date final decree? Click here to enter text.

5. How many children were born of this marriage? Click here to enter text.

 Name: Click here to enter text.

 DOB: Click here to enter text.

Baptized? Click here to enter text.

 Date: Click here to enter text.

 Church: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Who has custody of this child? Click here to enter text.

 Name: Click here to enter text.

 DOB: Click here to enter text.

Baptized? Click here to enter text.

 Date: Click here to enter text.

 Church: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Who has custody of this child? Click here to enter text.

 Name: Click here to enter text.

 DOB: Click here to enter text.

Baptized? Click here to enter text.

 Date: Click here to enter text.

 Church: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Who has custody of this child? Click here to enter text.

\*\* Please use extra pages if needed \*\*

6. How do you provide for their material welfare and for their religious education?

Click here to enter text.

7. Have you married / divorced again? Click here to enter text.

8. If yes, give details of each subsequent marriage:

 Name of spouse: Click here to enter text.

 Date: Click here to enter text.

 Spouse’ Religion: Click here to enter text.

 Place of marriage: Click here to enter text.

 Official: Click here to enter text.

 Was this his/her first marriage? Click here to enter text.

9. Name of Catholic Church you are attending now:

 Church Name: Click here to enter text.

 Address: Click here to enter text.

 City/St/Z: Click here to enter text.

 Phone: Click here to enter text.

 How long attended: Click here to enter text.

10. If presently married, your spouse’s Name: Click here to enter text.

 Is your present spouse Catholic: Click here to enter text.

11. Do you have children from this marriage? Click here to enter text.

12. Are these children being raised Catholic? Click here to enter text.

13. Describe your present situation. Click here to enter text.

**\* Please enclose copy of the following documents**

**\_\_\_\_\_ Former Marriage License
\_\_\_\_\_ Divorce Decree**

**\_\_\_\_\_ Newly Dated Baptismal Certificate**

With my signature, I attest that my answers are true and correct.

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

Petitioner Signature Priest/Deacon Signature

 *.*

Click here to enter a date. Click here to enter text.

Date Place

**DONATION AGREEMENT**

Canon law requires every Diocese to staff and maintain a Tribunal. The Bishop’s Appeal now subsidizes the Tribunal Office over $100,000 each year to provide this most important ministry.

The Tribunal Office incurs certain costs while process petitions. Staff salaries/medical insurance, priest stipends, continuing education, office utilities, equipment/supplies, phone/postage, and other general office maintenance must be paid.

We ask that a **$25** filing fee be submitted with every petition.

Any additional donation would be used to help defray the Diocesan Tribunal expenses.

Please check the appropriate statements below.

\_\_\_\_\_\_ I have enclosed a **$25** filing fee.

\_\_\_\_\_\_ I will make a $\_\_\_\_\_\_\_ donation when my case is completed.

\_\_\_\_\_\_ I am not able to make a donation now, but will prayerfully consider a future donation.

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

Petitioner's Signature Date

Make checks payable to the Diocese of Tyler.

Please return your petition to:

TYLER DIOCESAN TRIBUNAL

1015 ESE Loop 323

Tyler TX 75702

 *June 2020*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PP #\_\_\_\_\_\_\_ - 08\_\_\_\_\_**

**INTERPELLATION OF NON-BAPTIZED RESPONDENT**

If the Respondent cooperates, he/she is to answer the following questions; if it cannot be made for a just cause, this interpellation can be dispensed by the local ordinary:

1. Would you be willing to join a Christian Church and be baptized?

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

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2. Are you willing to restore common life and live in peace with your former spouse?
 Is there any possibility of reconciliation? Why, or why not?

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

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Respondent Signature Place

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

Witness Date

*June 2020*