



WASHINGTON PROVINCE
Secular Order of Discalced Carmelites



APPLICATION FOR ENTRANCE INTO THE ASPIRANCY
To be filled out by the Applicant after three visits to the community.

City/State where OCDS Community/GID meets _____

Religious Title of Community/GID _____

Community/GID ID Code _____

Name of Applicant _____

Street Address _____

City/State _____ Zip _____

Phone _____ E-mail _____

Date of Birth _____ City/State of birth _____

Date of Confirmation in the Catholic Church _____

Name of Parish where Confirmed _____

City/State of Parish where Confirmed _____

Copies of the following required documents have been submitted and reviewed by the Formation Director.
 (Copies should be returned to the applicant after having been reviewed by the Formation Director.)

Baptismal certificate Reviewed by _____ Date reviewed _____

First Communion Reviewed by _____ Date reviewed _____

Confirmation Reviewed by _____ Date reviewed _____

Current marital status: Single Married Widowed

If currently married, documentation showing proof of a valid marriage in the Catholic Church. (Statute 2c)

Current marriage certificate Reviewed by _____ Date reviewed _____

Name of present parish _____

Address of present parish _____

List any Catholic organizations/parish committees of which you are currently, or have been, a member. Please also list dates of active participation.

Please supply two references, preferably your Pastor and a member of the Discalced Carmelite Secular Order :

1. Name _____ Phone Number _____

Email _____ Relationship _____

2. Name _____ Phone Number _____

Email _____ Relationship _____

Are you now, or have you ever been, a member of any other Secular Order? Yes No

If yes, please state which one and dates of membership _____

Have you ever belonged to a religious order or community? Yes No

If yes, please state which one and dates of membership _____

Do you currently belong to any other group that requires Promises or Vows? Yes No

If yes, please state which one and dates of membership _____

State briefly why you wish to join the Discalced Carmelite Secular Order:

Signature of Applicant

Date

Council/Leadership Team vote on this application: Accepted Not accepted

Signature of Community President/Moderator

Date of Vote