

**A. Marriage presented for dissolution *in favorem fidei***

<b>1. Petitioner</b>	Surname:		Date of birth:		
	Given name(s):		Testimony: p. ____		
	<b>Baptismal status</b>				
	<i>At the time of the marriage:</i> <input type="checkbox"/> unbaptised <input type="checkbox"/> baptised non-Cath. <input type="checkbox"/> Catholic <input type="checkbox"/> invalid baptism <input type="checkbox"/> uncertain	<i>At present:</i> <input type="checkbox"/> unbaptized <input type="checkbox"/> <i>catechumen</i> <input type="checkbox"/> baptized non-Catholic <input type="checkbox"/> <i>reception into full communion desired</i> <input type="checkbox"/> Catholic <input type="checkbox"/> invalid baptism <input type="checkbox"/> uncertain	<b>Baptism</b>  Date: _____	Certificate: p. ____	
		<b>Reception into full communion</b>			
		Date: _____	Certificate: p. ____		
Former/subsequent marriages? <input type="checkbox"/> NO <input type="checkbox"/> YES ( <i>cf. attached special form</i> )					
<b>2. Respondent</b>	Surname:		Date of birth:		
	Given name(s):		<input type="checkbox"/> Testimony: p. ____ <input type="checkbox"/> Declaration of absence: p. ____		
	<b>Baptismal status</b>				
	<i>At the time of the marriage:</i> <input type="checkbox"/> unbaptised <input type="checkbox"/> baptised non-Cath. <input type="checkbox"/> Catholic <input type="checkbox"/> invalid baptism <input type="checkbox"/> uncertain	Changes in status during or after the marriage:	<b>Baptism</b>  Date: _____	Certificate: p. ____	
		<b>Reception into full communion</b>			
		Date: _____	Certificate: p. ____		
Former marriages? <input type="checkbox"/> NO <input type="checkbox"/> YES ( <i>cf. attached special form</i> ) <input type="checkbox"/> uncertain					
<b>3. Marriage</b>	Date:		Age – Petitioner:	Age – Respondent:	
	Certificate: p. ____		Preuptial documents and dispensation DC: p. ____		
<b>4. Children</b>	Number:		If minor(s), who has custody?		
	Baptism:		<input type="checkbox"/> NO <input type="checkbox"/> YES, non-Catholic <input type="checkbox"/> YES, Catholic <input type="checkbox"/> other:	Certificate(s): p. ____	

# SUMMARY

<b>5. Divorce</b>	Cohabitation since baptism of both Parties: <input type="checkbox"/> NO <input type="checkbox"/> YES	
	Date of final separation:	
	Data of Divorce Absolute:	Divorce Decree: p. ____

## B. Proposed marriage

<b>1. Intended Spouse (Third Party)</b>	Surname:	Date of birth:								
	Given name(s):	Testimony: p. ____								
	<b>Baptismal status</b>									
	<input type="checkbox"/> unbaptized <input type="checkbox"/> <i>catechumen</i> <input type="checkbox"/> baptized non-Catholic <input type="checkbox"/> <i>reception into full communion desired</i> <input type="checkbox"/> Catholic <input type="checkbox"/> invalid baptism <input type="checkbox"/> uncertain	<table border="1" style="width: 100%;"> <tr> <td colspan="2" style="text-align: center;"><b>Baptism</b></td> </tr> <tr> <td>Date:</td> <td>Certificate: p. ____</td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>Reception into full communion</b></td> </tr> <tr> <td>Date:</td> <td>Certificate: p. ____</td> </tr> </table>	<b>Baptism</b>		Date:	Certificate: p. ____	<b>Reception into full communion</b>		Date:	Certificate: p. ____
	<b>Baptism</b>									
Date:	Certificate: p. ____									
<b>Reception into full communion</b>										
Date:	Certificate: p. ____									
Former marriages? <input type="checkbox"/> NO <input type="checkbox"/> YES ( <i>cf. attached special form</i> )										

<b>2. Proposed Marriage</b>	Parties cohabiting?	<input type="checkbox"/> NO <input type="checkbox"/> YES		
	Marriage attempted?	<input type="checkbox"/> NO <input type="checkbox"/> YES – date:		
		Certificate: p. ____		
	Dispensation DC requested?	<input type="checkbox"/> NO <input type="checkbox"/> YES	Promises signed: <input type="checkbox"/> YES, p. ____	
	Permission MM requested?	<input type="checkbox"/> NO <input type="checkbox"/> YES		
Children of this union (number)?		Baptismal certificate(s): p. ____		

<b>3. Procedural steps</b>	Letter of Petition, dated and signed p. ____	Nomination of the Commission: p. ____
	Letter of the Parish Priest: p. ____	Remarks of the Instructor: p. ____
	Observations of the Defender: p. ____	<i>Votum</i> of the Bishop: p. ____
	Pages numbered consecutively? <input type="checkbox"/> YES	Index? <input type="checkbox"/> YES
	Three copies of acts, authenticated? <input type="checkbox"/> YES	-----
	Remuneration:	<input type="checkbox"/> The Petitioner is able to contribute the payment. <input type="checkbox"/> <i>in forma pauperum</i> <input type="checkbox"/> The Petitioner is able to contribute the amount of _____.