



**DIOCESE OF ALLENTOWN  
The Tribunal**

Telephone  
(610) 434-3200

7660 Imperial Way, Suite 125  
Allentown, PA 18195

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(610) 433-3104

**PRELIMINARY INFORMATION FORM**

I, \_\_\_\_\_, a \_\_\_\_\_, age \_\_\_\_\_,   
NAME OF PETITIONER (USE MAIDEN NAME IF A WOMAN) AT THE TIME OF MARRIAGE  
 Baptized Catholic  
 Baptized Orthodox  
 Baptized Protestant  
 Non-Baptized

contracted in marriage with \_\_\_\_\_, a \_\_\_\_\_,   
NAME OF PETITIONER (USE MAIDEN NAME IF A WOMAN)  
 Baptized Catholic  
 Baptized Orthodox  
 Baptized Protestant  
 Non-Baptized

age \_\_\_\_\_, on \_\_\_\_\_ . We entered this union at   
AT THE TIME OF MARRIAGE DATE OF MARRIAGE

\_\_\_\_\_   
NAME OF CHURCH OR BUILDING, ALSO INCLUDE ADDRESS, CITY AND STATE

in the presence of \_\_\_\_\_ who is a \_\_\_\_\_   
NAME OF OFFICIANT PRIEST, MINISTER, RABBI, MAGISTRATE, ETC.

During this marriage there was/were \_\_\_\_\_ temporary separation(s). The date of the final separation was \_\_\_\_\_,   
NUMBER DATE

when \_\_\_\_\_ left the union. The total amount of time we lived together as husband and wife   
PETITIONER OR RESPONDENT

was \_\_\_\_\_ . There was/were \_\_\_\_\_ child(ren) born into this marriage. Since our   
SPECIFY EXACTLY (E.G., 5 YEARS, 7 MONTHS) NUMBER

marriage was irretrievably broken, \_\_\_\_\_ filed for a grant of Civil Divorce   
NAME YOURSELF OR RESPONDENT

through the Court of \_\_\_\_\_ County in \_\_\_\_\_,   
NAME OF COUNTY CITY

\_\_\_\_\_. The Civil Divorce became final on \_\_\_\_\_ .   
STATE DATE

There is no hope of reconciliation between us.

**THIS SECTION FOR TRIBUNAL USE ONLY**

This PRELIMINARY INFORMATION FORM was received at the Tribunal on \_\_\_\_\_

Reviewed at Tribunal by \_\_\_\_\_

Allentown Tribunal competent by reason of  Contract  Respondent's Domicile

Allentown Tribunal requires consent to competence from Diocese of \_\_\_\_\_

by reason of  Respondent's Domicile  Collection of Proofs

BACKGROUND INFORMATION FORM was mailed on \_\_\_\_\_

Initial Payment was recorded on \_\_\_\_\_

**PETITIONER  
(YOURSELF)**

1. \_\_\_\_\_  
PRESENT NAME

2. \_\_\_\_\_  
MAIDEN NAME IF A WOMAN

3. \_\_\_\_\_  
STREET ADDRESS

4. \_\_\_\_\_  
CITY STATE ZIP

5. ( ) ( )  
HOME PHONE NUMBER WORK PHONE NUMBER

6. \_\_\_\_\_  
DATE OF BIRTH  MALE  FEMALE

7. \_\_\_\_\_  
PLACE OF BIRTH, CITY, COUNTY, STATE, AND COUNTRY

8. \_\_\_\_\_  
FATHER'S NAME

9. \_\_\_\_\_  
FATHER'S RELIGION

10. \_\_\_\_\_  
MOTHER'S MAIDEN NAME

11. \_\_\_\_\_  
MOTHER'S RELIGION

12. \_\_\_\_\_  
NAME OF CHURCH OF YOUR BAPTISM

13. \_\_\_\_\_  
CITY OF CHURCH OF BAPTISM STATE

14. \_\_\_\_\_  
DENOMINATION OF CHURCH OF BAPTISM

15. \_\_\_\_\_  
DATE OF BAPTISM

16. \_\_\_\_\_  
RELIGION AT THE TIME OF MARRIAGE

17. \_\_\_\_\_  
NAME OF CHURCH PRESENTLY ATTENDING

18. \_\_\_\_\_  
ADDRESS OF PRESENT CHURCH (INCLUDE CITY AND STATE)

19. \_\_\_\_\_  
NAME OF PASTOR OF PRESENT CHURCH

**RESPONDENT\*  
(YOUR FORMER SPOUSE)**

1. \_\_\_\_\_  
PRESENT NAME

2. \_\_\_\_\_  
MAIDEN NAME IF A WOMAN

3. \_\_\_\_\_  
STREET ADDRESS

4. \_\_\_\_\_  
CITY STATE ZIP

5. ( ) ( )  
HOME PHONE NUMBER WORK PHONE NUMBER

6. \_\_\_\_\_  
DATE OF BIRTH  MALE  FEMALE

7. \_\_\_\_\_  
PLACE OF BIRTH, CITY, COUNTY, STATE, AND COUNTRY

8. \_\_\_\_\_  
FATHER'S NAME

9. \_\_\_\_\_  
FATHER'S RELIGION

10. \_\_\_\_\_  
MOTHER'S MAIDEN NAME

11. \_\_\_\_\_  
MOTHER'S RELIGION

12. \_\_\_\_\_  
NAME OF CHURCH OF HIS/HER BAPTISM

13. \_\_\_\_\_  
CITY OF CHURCH OF BAPTISM STATE

14. \_\_\_\_\_  
DENOMINATION OF CHURCH OF BAPTISM

15. \_\_\_\_\_  
DATE OF BAPTISM

16. \_\_\_\_\_  
RELIGION AT THE TIME OF MARRIAGE

17. \_\_\_\_\_  
NAME OF CHURCH PRESENTLY ATTENDING

18. \_\_\_\_\_  
ADDRESS OF PRESENT CHURCH (INCLUDE CITY AND STATE)

19. \_\_\_\_\_  
NAME OF PASTOR OF PRESENT CHURCH

\* Please note that the information pertaining to the Respondent, especially the complete current address, is very important. Omissions will only cause a delay in this process

**PETITIONER  
(YOURSELF)**

**RESPONDENT  
(YOUR FORMER SPOUSE)**

20. Are you a convert to Catholicism?

20. Is he/she a convert to Catholicism?

21. If "Yes", give the date and place where you were received into the Church:

21. If "Yes", give the date and place where he/she was received into the Church:

DATE CHURCH'S NAME CITY STATE

DATE CHURCH'S NAME CITY STATE

22. Was this your first and only marriage?  Yes  No  
If "No", complete question 23.

22. Was this his/her first and only marriage?  Yes  No  
If "No", complete question 23.

23. If this was not your first and only marriage, list in chronological order every marriage you have entered:

DATE OF MARRIAGE NAME OF SPOUSE DATE OF DIVORCE

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

24. If this is not the Respondent's first and only marriage, list in chronological order every marriage he/she has entered:

DATE OF MARRIAGE NAME OF SPOUSE DATE OF DIVORCE

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

25. Where did the Catholic party(ies) live at the time of this wedding?

I am Catholic and at the time of the wedding I lived in \_\_\_\_\_, CITY  
STATE ZIP CODE

The Respondent is Catholic and at the time of the wedding he/she lived in \_\_\_\_\_, CITY  
STATE ZIP CODE

26. If one or both of you were Catholic at the time of the wedding, but a Catholic priest or deacon was not the official witness at your wedding, was a dispensation granted by your bishop for the ceremony to take place in other than a Catholic church?  Yes  No

27. If you answered "No" to the previous question, did you and the Respondent ever go before a Catholic priest or deacon at a later date to exchange your vows according to the Catholic form of marriage?  Yes  No  
If "Yes":

We validated our marriage on \_\_\_\_\_ before \_\_\_\_\_  
DATE OFFICIANT  
at \_\_\_\_\_ in \_\_\_\_\_, \_\_\_\_\_  
CHURCH CITY STATE

# PRESENT STATUS

## PETITIONER (YOURSELF)

28. My status is  Single  Engaged  Remarried

engaged

29. I was  remarried on \_\_\_\_\_  
DATE

to \_\_\_\_\_  
NAME (INCLUDE MAIDEN NAME IF A WOMAN)

30. Has your present fiancé(e)/spouse been previously married?  Yes  No

31. If your present fiance/spouse was married before,

a. Is he/she free to marry in the Catholic Church?  Yes  No

b. Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Catholic  
 Orthodox  
 Protestant

c. He/she, a  Non-baptized, was married to \_\_\_\_\_, a

NAME (INCLUDE MAIDEN NAME IF A WOMAN)

- Catholic  
 Orthodox  
 Protestant  
 Non-baptized

They married on \_\_\_\_\_ in, \_\_\_\_\_ before a

DATE

NAME OF CHURCH AND DENOMINATION

\_\_\_\_\_  
PRIEST, MINISTER, RABBI, MAGISTRATE, ETC.

The date of divorce was \_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PETITIONER

\_\_\_\_\_  
SIGNATURE OF WITNESSING CLERGY OR NOTARY

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CHURCH

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

When submitting this Preliminary Information Form to The Tribunal, please include a check in the amount of seventy-five dollars (\$75) as the initial payment of the Tribunal Fee. Make your check payable to The Tribunal/Diocese of Allentown. Thank You.