

SAINT JOSEPH SEMINARY  
15384 North Church Road  
Rathdrum, ID 83858  
(208-687-0290)

APPLICATION FOR ADMISSION

1. Full name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

2. Address: \_\_\_\_\_

3. Parish and name of pastor: \_\_\_\_\_

4. Birth date: \_\_\_\_\_ Place: \_\_\_\_\_

5. Parish of your Baptism: \_\_\_\_\_

6. Father's Name: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

7. Are parents living? Father: \_\_\_\_\_ Mother: \_\_\_\_\_ Are you living with both? \_\_\_\_\_

If not, with whom? \_\_\_\_\_ If either parent is deceased, indicate date and cause of death: \_\_\_\_\_ Has either parent remarried? \_\_\_\_\_ If yes,

which? \_\_\_\_\_ Name of foster parent: \_\_\_\_\_

8. List below the names of your brothers and sisters according to age:

Brothers	Age	School now attending	If married, in what church?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Sisters	Age	School now attending	If married, in what church?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. Have you any relatives who are priests or religious? Name: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

10. Religion of parents: Father \_\_\_\_\_ (convert? \_\_\_ ) Mother: \_\_\_\_\_ (convert? \_\_\_ )

11. Father's occupation: \_\_\_\_\_

12. Has any member of your family or of the family of your mother or father ever suffered from a nervous breakdown or a more serious nervous illness? If so, give relationship to you and approximate date of illness: \_\_\_\_\_  
\_\_\_\_\_

13. Are you in any manner whatever physically handicapped? If so, explain: \_\_\_\_\_

List any major illnesses or operations you have had: \_\_\_\_\_  
\_\_\_\_\_

14. Do you require special diet? \_\_\_\_\_

15. Have you any physical condition preventing normal activity and exercise? \_\_\_\_\_  
\_\_\_\_\_

16. Have you had any musical education (vocal or instrumental; if instrumental, explain the instruments and proficiency): \_\_\_\_\_

17. Indicate schools attended (state the number of years in each and year of graduation):  
Grade Schools: \_\_\_\_\_  
\_\_\_\_\_

High Schools: \_\_\_\_\_

18. Have you ever been accepted as a student by any religious organization? \_\_\_\_\_

19. Has your pastor advised you to study for the priesthood? \_\_\_\_\_

20. In applying for admission to the seminary, do you make this application of your own free will? \_\_\_\_\_

*I, the undersigned, declare that the information which I have provided in this application is true. I further represent that I know of no hindrance or impediment, whether physical, mental, moral or otherwise, which would render the candidate unsuitable for the seminary or the priesthood.*

Date: \_\_\_\_\_ Signature: \_\_\_\_\_