

**METROPOLITAN TRIBUNAL
ARCHDIOCESE OF LOS ANGELES**
3424 Wilshire Boulevard
Los Angeles, CA 90010-2241
213-637-7245

Pauline Privilege Petition
[canons 1143-1147]

Case: _____
Prot. No.: PP-_____

**Petition to the Archbishop of Los Angeles
to Invoke the PAULINE PRIVILEGE**

YOUR EXCELLENCY:

I, _____,
(Full name of Petitioner, including maiden name if applicable)

Please check the applicable box:

- sincerely interested in receiving baptism in the Catholic Church,
 having already received baptism [religion _____, date _____]

hereby petition an investigation to determine my right to use the PAULINE PRIVILEGE
in order to be free to marry in the Catholic Church.

As an unbaptized person, I was married to _____,
(Full name of the Other Party, including maiden name)
also unbaptized, on _____ in the year _____.

This marriage ended in a civil divorce, granted on _____ in the year _____.
There is no hope for reconciliation because _____.

I understand that Your Excellency or your delegate must conduct the Canonical
Interpellations of the other party as required by canon 1144. ***I agree to abide by the
decision of the Church in my case, and understand that no guarantee can be given
of an affirmative decision or of a definite time within which the decision will be
forthcoming.***

Petitioner's Signature
Address _____
City, State, Zip _____
Email _____
Petitioner Home Phone _____
Petitioner Cell Phone _____
Petitioner Work Phone _____

Signature of Priest/Deacon/Parish Minister
PRINT Name _____
Parish _____
Address _____
City, State, Zip _____
Email _____
Best Phone _____
Alternate Phone _____

Date: _____

[Signature of Pastor required if the Parish Representative is not a priest] Date: _____

For Tribunal Use Only	
Date received at Tribunal _____	Notary Name _____
Filing Fee received (\$100) YES NO	Check Number _____
	Paid on-line Tracking # _____

PLEASE INCLUDE WITH THIS PETITION:

- Marriage Certificate**
- Final Divorce Decree**
- Baptismal Certificate of Petitioner [if already baptized]**
- Baptismal Certificate of Proposed Spouse [if applicable]**
- \$100 filing fee**

Please make check payable to:

Archdiocese of Los Angeles – Tribunal

Payments may also be made on-line through the Tribunal website once you have a Case number.

DATA CONCERNING THE OTHER PARTY

Please type or neatly print the following data about the Other Party (i. e., your spouse in the marriage you are seeking to have dissolved).

Other Party's Current Legal Name: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Maiden Name (if different): _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

(If you do not have an address for the Other Party, please provide the name of a relative "in care of" whom we can attempt to reach him or her.)

Name: _____

Relationship of this Person to the Other Party: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

If you have no address at all for the Other Party, it will be very difficult if not impossible to verify the facts necessary to authorize the use of the Pauline Privilege. Please have the parish minister with whom you are working consult the Tribunal to determine whether a petition to invoke the Pauline Privilege is appropriate, or whether some other approach would be better.

Thank you.

WITNESSES CONCERNING THE FACT THAT THE PARTIES WERE NOT BAPTIZED

Please name at least two witnesses who are able and willing to provide testimony about your religious background, and two witnesses able and willing to provide similar testimony concerning the Other Party. If you wish to name more than two witnesses, please copy this page and include the additional witnesses.

The preferred witnesses are the parents of the person. Other competent witnesses are older siblings, uncles, aunts or older cousins who have direct contact with the party throughout life, and knowledge concerning the religious practice of the family. If no other witnesses are available, younger brothers and sisters of the unbaptized party may be named. Please do not name children of the marriage in question. Please notify the witness that you have named them in connection with your petition and that they should expect to hear from the Tribunal.

In addition to witnesses, and sometimes in place of their testimony, it is possible to submit documentary evidence that establishes a person was never baptized. If there is such documentary evidence, please submit that with your petition.

Witnesses Regarding the Petitioner:

Name: _____

Relationship to the Petitioner: _____

Proper Salutation: (*Please Circle*: Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Name: _____

Relationship to the Petitioner: _____

Proper Salutation: (*Please Circle*: Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Witnesses Regarding the Other Party:

Name: _____

Relationship to the Petitioner: _____

Proper Salutation: (*Please Circle*: Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Name: _____

Relationship to the Petitioner: _____

Proper Salutation: (*Please Circle*: Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

**PAULINE PRIVILEGE
DEPOSITION OF THE PETITIONER**

Acknowledging that I fully understand the nature of an oath (i.e., the calling upon God to witness the truth of the statements made), I swear that I will tell the truth, the whole truth, and nothing but the truth in this deposition, so help me, God!

(Please type or neatly print all answers. If additional room is needed, please use the back of the questionnaire. Thank you.)

1. First Name: _____ Middle Name: _____
Surname: _____ Maiden Name (if different): _____

If you entered the marriage in question using yet a different name, please attach an explanation.

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ E-mail: _____

Your Birth Date: _____ Birth Place: _____

Religion at the time of the marriage in question _____

Current Religion: _____

Have you started the RCIA program? Yes No Completed

Concerning Your Own Religious Background:

2. During your childhood and youth until the time you entered the marriage in question, were you ever baptized in the Catholic Church or any other Christian church or denomination?
 Yes No

If you responded "yes" then a petition to invoke the Pauline Privilege is not appropriate unless there is significant reason to doubt the validity of that baptism. If there is a question concerning whether this was valid Christian baptism, please indicate when, where, and in what Christian denomination it took place.

3. If you were not baptized in your infancy, childhood or youth, please explain: a) how you know this fact and b) why you did not receive baptism in those years.

4. What is your father's name? _____

Is he living? Yes No
(If so and he is able and willing to testify, please include him in your list of witnesses.)

To what religion did your father belong? _____

Did he practice this faith actively? Yes No

If he was from a Christian tradition, what were his views on the importance of baptism?

5. What is your mother's name? _____

Is she living? Yes No
(If so and she is able and willing to testify, please include her in your list of witnesses.)

To what religion did your mother belong? _____

Did she practice this faith actively? Yes No

If she was from a Christian tradition, what were her views on the importance of baptism?

6. Were you ever under the guardianship of someone other than your parents?

Yes No

(If so, on the reverse please give the name(s) of your guardian(s) and answer the same questions about them as were posed concerning your parents in ## 4 and 5.)

7. Were any of your siblings baptized? Yes No

If so, please complete the following information for each of your siblings.

Name of Sibling	Birth year	Church of Baptism	Date of Baptism

8. Did you ever attend any church and/or Sunday school, even if there was no formal affiliation?

Yes No

(If so, please list all churches and Sunday Schools you attended.)

Name of Church	Street address/city/state	Years

Concerning the Religious Background of the Other Party (i.e., your former spouse):

9. First Name: _____ Middle Name: _____
Surname: _____ Maiden Name (if different): _____

If he/she entered the marriage in question using yet a different name, please attach an explanation.

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ E-mail: _____

His/her Birth Date: _____ Birth Place: _____

Religion at the time of the marriage in question _____

Current Religion: _____

10. During his/her childhood and youth until the time he/she entered the marriage in question, was he/she ever baptized in the Catholic Church or any other Christian church or denomination? Yes No

If you responded “yes” then a petition to invoke the Pauline Privilege is not appropriate unless there is significant reason to doubt the validity of that baptism. If there is a question concerning whether this was valid Christian baptism, please indicate when, where, and in what religious tradition the ceremony took place. Attach the certificate of the baptism if at all possible.

11. If the Other Party was not baptized please explain to the best of your knowledge: a) how you know this fact and b) why he/she did not receive baptism.

12. What is the name of the Other Party's father? _____

Is he living? Yes No

(If so and he is able and willing to testify, please include him in your list of witnesses for the Other Party.)

To what religion did his/her father belong? _____

Did he practice this faith actively? Yes No

If he was from a Christian tradition, what were his views on the importance of baptism?

13. What is the name of the Other Party's mother? _____

Is she living? Yes No

(If so and she is able and willing to testify, please include her in your list of witnesses for the Other Party.)

To what religion did his/her mother belong? _____

Did she practice this faith actively? Yes No

If she was from a Christian tradition, what were her views on the importance of baptism?

14. Was the Other Party ever under the guardianship of someone other than his/her parents? Yes No

15. During the period of your common life, did the Other Party receive baptism?
 Yes No

How do you know this? _____

16. Has the Other Party, has he/she been baptized into any Christian Church or denomination after your marriage and divorce? Yes No

How do you know this? _____

Concerning the Marriage in Question:

17. Was this the first marriage for each of you? Yes No
(If not, please explain.) _____

18. How many children were born of this marriage? _____
How many of those children are still minors? _____
Who has custody of the minor children? _____

19. What was the cause of the failure of this marriage?

20. Have you entered any other marriages? Yes No

If so, please provide the following information for each marriage:

Other Spouse(s): First Name: _____ Middle Name: _____ Surname: _____ Maiden Name (if different): _____ His/Her Religion at time of marriage: _____ Baptism: <input type="checkbox"/> Catholic <input type="checkbox"/> Other _____ <input type="checkbox"/> Not baptized Marriage date: _____ <input type="checkbox"/> Catholic ceremony <input type="checkbox"/> Other religious ceremony <input type="checkbox"/> civil ceremony Place of marriage: City: _____ State: _____ Had this person been married prior to your union? <input type="checkbox"/> Yes <input type="checkbox"/> No Number of prior marriages: <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> other ____ Divorce date: _____ and/or Death date: _____

Please answer this section if you are currently planning a marriage in the Catholic Church

Concerning the Person You Wish to Marry in the Church:

21. First Name: _____ Middle Name: _____
Surname: _____
Maiden Name (if different): _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: (____) _____ Work Phone: (____) _____
Cell Phone: (____) _____ E-mail: _____
His/her Birth Date: _____ Birth Place: _____
22. His/her present religion: _____ Has he/she been baptized?
 Yes No
If so, where? _____ When? _____
(If baptized, please enclose a copy of the baptismal certificate.)
23. How long have you known him/her? _____
24. Did your friendship with him/her play any part whatsoever in your separation and divorce from your former spouse? Please explain.

25. Are you and the person you wish to marry in the Catholic Church already united by any civil or religious exchange of marriage vows? Yes No

If so, please give the date: _____ and place: _____
(Please enclose a copy of your certificate of marriage.)

26. Do you and the person you wish to marry in the Church have any children?

Yes No

If so, how many? _____

Have they been baptized in the Catholic Church? Yes No

(If so, please enclose copies of their baptismal certificates.)

27. Does the person you wish to marry have any previous marriages? Yes No

If so, Please explain. _____

28. Is the person you wish to marry free to marry according to the laws of the Catholic Church?

Please explain. _____

I verify that the testimony given above, to the best of my knowledge, is the truth, the whole truth, and nothing but the truth.

Signature of the Petitioner

Date

Signature of the Priest/Deacon/Parish Minister

PRINT Name of Priest/Deacon, etc.

Parish: _____

City: _____

(Parish Seal)