



# RCIA Child/Teen Inquirer

## Information Form

*Information on the form is held in confidence and is not shared without your permission.*

Today's Date: \_\_\_\_\_

Child/Teen's Name:

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

include **locality** (town, city, county, etc.), **region** (state, province, territory, etc.), and **country**

Grade Level: \_\_\_\_\_ School: \_\_\_\_\_

### I. PARENT/GUARDIAN INFORMATION

*List below the name(s) of parent(s)/ guardian(s) and present religious affiliation, if any:*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

Phone (Daytime): \_\_\_\_\_ (Evening/Weekend): \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Child/teen lives with:  Parents  Mother Only  Father Only  Other (please explain):

If child/teen lives with one parent/guardian, please indicate who has legal custody and/or if the child/teen also lives with a step-parent: \_\_\_\_\_

If there is a joint custody arrangement, please provide alternate full address: \_\_\_\_\_

PLEASE ENSURE THAT YOU HAVE FILLED OUT THE ARCHDIOCESAN FORM, "Rights and Responsibilities of Parents and Guardians of Students in Parish Faith Formation Programs."

### II. RELIGIOUS HISTORY

1. Has your child/teen ever been baptized?  Yes  No  I am not sure

*If you answered "Yes" to Question 2, please provide the following information:*

- a. In what denomination was your child/teen baptized? \_\_\_\_\_
- b. Date or approximate age when your child/ teen was baptized: \_\_\_\_\_
- c. Baptismal name (if different from current name): \_\_\_\_\_
- d. Place of Baptism (name of church/denomination): \_\_\_\_\_
- e. Address, if known: \_\_\_\_\_
- f. Location, if known: \_\_\_\_\_

include **locality** (town, city, county, etc.), **region** (state, province, territory, etc.), and **country**

**2. If your child/teen was baptized as a Catholic, check the sacraments he/she has already received:**

- Penance (Confession)
  Eucharist (First Communion)
  Confirmation

**3. For a teen: Has he/she been married or is he/she currently married?**

- Never been married
  Is currently married
  Has been married

**III. FAMILY INFORMATION**

List the name(s) of any children or other dependents (e.g.) John—brother; Jean—stepsister).

Name: _____	Relationship: _____	Age: _____
Name: _____	Relationship: _____	Age: _____
Name: _____	Relationship: _____	Age: _____
Name: _____	Relationship: _____	Age: _____
Name: _____	Relationship: _____	Age: _____

**III. LEARNING STYLE**

Not all people learn in the same way. You can help your child/teen get as much as possible out of this process by sharing about your child's learning abilities.

**In what ways do you think your child/ teen enjoys learning?**

Listening (*Lecture; Storytelling*) \_\_\_\_\_

Seeing (*Looking at pictures; Identifying symbols; Watching a video*) \_\_\_\_\_

Reading (*At what grade level does your child/ teen read? Does your child enjoy reading?*) \_\_\_\_\_

Writing (*At what level is your child/teen's writing skills? Does your child/teen write stories/ keep a journal?*) \_\_\_\_\_

Hands On (*Does your child/ teen enjoy doing projects or making crafts?*) \_\_\_\_\_

Group Work (Does your child/teen enjoy working with others?) \_\_\_\_\_

**It will help to know your child's/teen's strongest attributes and challenges. Please add below any helpful details that you think would be relevant.**

For example: *“Mary is very outgoing and gets excited when she is having fun. She becomes quiet when she doesn't understand something. She works well with other children. Mary also has a 30% hearing loss in her left ear. She may not hear you if you are standing behind her and speaking normally.”*

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**V. GENERAL QUESTIONS**

**1. Please describe the types of religious education in which your child/ teen has participated.**

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**2. What contact has your child/teen had with the Catholic Church to date?**

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**3. What are some of the questions or concerns your child/teen has about the Catholic Church?**

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**4. Please summarize below the reason(s) your child/teen desires to begin the Christian initiation process.**

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