

METROPOLITAN TRIBUNAL

ARCHDIOCESE OF ATLANTA

DISSOLUTION OF MARRIAGE – PAULINE PRIVILEGE APPLICATION FORM



INSTRUCTIONS

The present form can be filled in either by hand or, preferably, on the computer. If you choose to use your computer, you will need the program Acrobat Reader, which you can download for free from the website adobe.com. Do not use your browser, as it won't allow you to save your file. If you choose to handwrite your answers, please write legibly. In any case, do not forget to sign where it is indicated.

Do not begin filling out this application until you have met with a Tribunal Advocate. Inquire in your parish or contact the Metropolitan Tribunal to learn how to select an Advocate. Do not rush through the questionnaire. Answer all the questions as completely as possible. Taking some time now will save you time later.

In this questionnaire, you are the "Petitioner," and the other spouse to the marriage that you are asking to be dissolved is the "Respondent." The person that you intend to marry in the Catholic Church is the "Intended Spouse." The mailing address of the Respondent is extremely important. Making sure that the address is correct will avoid delays. Without the cooperation of the Respondent it is not possible to instruct a Pauline Privilege case.

DOCUMENTS CHECKLIST

Please make sure that you are submitting all the required documents by completing the following checklist. Depending on the case, some documents will be required and some will be unnecessary. Please check the appropriate checkbox.

All documents submitted must be originals or copies authenticated by a notary public or by an ecclesiastical notary. Baptismal certificates must be recent, issued within the last 6 months. All incomplete applications will be returned.

Please keep a copy of any documents you submit to the Tribunal, in case they are lost in the mail.

YES	N/A	DOCUMENT
<input type="checkbox"/>		Mailing address of the Respondent.
<input type="checkbox"/>	<input type="checkbox"/>	Baptismal certificate of the Petitioner.
<input type="checkbox"/>	<input type="checkbox"/>	Certificate of enrolment in RCIA for the Petitioner.
<input type="checkbox"/>	<input type="checkbox"/>	Certificate of reception in the Catholic Church for the Petitioner.
<input type="checkbox"/>	<input type="checkbox"/>	Marriage certificate for the marriage to the Respondent.
<input type="checkbox"/>	<input type="checkbox"/>	Decree of divorce for the marriage to the Respondent (containing judge's signature).
<input type="checkbox"/>	<input type="checkbox"/>	Baptism certificate for Catholic children of the Petitioner and the Respondent.
<input type="checkbox"/>	<input type="checkbox"/>	Documents concerning other marriages of the Petitioner (marriage certificate, divorce decree, and ecclesiastical decree of nullity or decree of dissolution).
<input type="checkbox"/>	<input type="checkbox"/>	Baptismal certificate or certificate of reception in the Catholic Church for the Intended Spouse.
<input type="checkbox"/>	<input type="checkbox"/>	Marriage Certificate for Petitioner's civil marriage to the Intended Spouse.
<input type="checkbox"/>	<input type="checkbox"/>	Baptismal certificate for Catholic children of the Petitioner and the Intended Spouse.
<input type="checkbox"/>	<input type="checkbox"/>	Documents attesting the freedom to marry of the Intended Spouse (marriage certificate, divorce decree, and ecclesiastical decree of nullity or decree of dissolution for any marriages of the Intended Spouse).

For Tribunal use: Date Received

Prot. Num.

AGREEMENT OF UNDERSTANDING

1. I understand that, if my case is accepted for consideration, it does not guarantee that a dissolution will be granted.
2. I understand that I am not guaranteed that the case will be concluded by a certain date. As such, I agree to wait until I receive a final decision in writing before I set a definite date for a marriage in the Catholic Church.
3. I understand and accept that Canonical law obligates the Tribunal to contact the Respondent and present him or her with the opportunity to participate in the process. Therefore, I acknowledge that I must provide the full current address of the Respondent. All reasonable efforts to locate the Respondent must be exhausted by me. The requirement of contacting the Respondent may not be omitted.
4. I understand that I must contact my witnesses personally to inform them that I have started this case. I will ask my witnesses to respond.
5. All contents of this investigation will be kept confidential, reserved exclusively to the designated officials of the Catholic Church, according to the canon law of the Roman Catholic Church.
6. I understand that if, with occasion of the instruction of the case, the Metropolitan Tribunal were to learn about specific information, then by law the Metropolitan Tribunal may be required to report such information to legal authorities. Such information may include names or situations in which a minor has been subjected to physical or sexual abuse or neglect. I release the Archdiocese of Atlanta and its agents from any liability for disclosure of information to appropriate legal authorities about abuse of a minor.
7. I also understand that if, with occasion of the instruction of the case, the Metropolitan Tribunal were to learn about specific information regarding abuse (past or present) by clergy or other professional employees or volunteers of the various parishes and institutions of the Roman Catholic Church, this information will be reported to the Office of the Archbishop of Atlanta.
8. In recognition of the religious nature of this process, I voluntarily waive now, and in the future, any rights under civil law to subpoena the acts of the case in judicial discovery. This waiver is given without reservation, condition or limit of time.
9. I agree to keep confidential and secret any information that I shall learn in the course of the process because all testimony in this case is given for the possible ecclesiastical dissolution of my marriage. Since my interest is solely to present my case to the Tribunal, I promise not to use information that I may learn through the case in any other forum or for any other purpose.
10. I understand that no fees will be charged for any cases submitted to the Metropolitan Tribunal of Atlanta.

Accepted in (city, state) _____, on _____.

Signature of the Petitioner

ELECTRONIC TRANSMISSION OF DATA

The use of new technologies allows for more expedience and convenience in our communications. If you are willing to receive our communications electronically, please sign the acceptance below.

Definition of electronic case file transmission: For the purposes of this agreement, electronic transmission of data refers to the communication of information pertaining to the case, between the Petitioner and the Tribunal, via email and/or other appropriate electronic means.

Benefits of electronic case file transmission: The electronic transmission of case information reduces costs through the diminishment of paper consumption as well as postal fees. In addition to being cost-efficient, this also reduces delivery time and permits the rapid dissemination of information to all case handlers and case parties.

Risks of electronic case file transmission: Electronic transmission of case information presents an inherent level of risk to the confidentiality of information related to a Petitioner’s case file. Although the email server of the Tribunal is encrypted, and documents are password-protected in an effort to maintain case file confidentiality, electronic transmission of material cannot guarantee confidentiality. By signing below and utilizing the electronic transmission system, the Petitioner acknowledges and agrees to the information and terms contained herein, and further waives any and all claims against, and agrees to hold harmless the Archbishop of Atlanta, the Tribunal and any sender of case information via electronic transmission, with respect to any and all claims, loss and/or damage arising from and/or related to the electronic transmission of case information.

Parties who may receive electronic case file transmission: Case information may be sent electronically from the Tribunal to the following parties: Judges, Psychologists, Counselors, Petitioner and/or Respondent Advocates, Defender of the Bond, Promoter of Justice, and Court of Second Instance.

I have read and understand the information provided to me regarding the Tribunal’s release of information through electronic means, and I agree to the terms.

Do you want to receive our communications electronically? Yes No.

Accepted in (city, state) _____, on _____.

Signature of the Petitioner

PETITIONER'S GENERAL INFORMATION

Preferred language: English Español Tiếng Việt

Title: _____

First name: _____

Middle name: _____

Current last name: _____

Maiden name: _____

Gender: Male Female

Street address: _____

City, State: _____

Zip code: _____

Cell phone: _____

Home phone: _____

Email: _____

Date of birth: _____

Place of birth: _____

Have you ever been baptized? _____

Were you baptized at the time of the wedding? _____

If so, date of baptism: _____

City, State: _____

Religion or denomination of baptism:

Religion or denomination at the time of the wedding:

Current religion or denomination:

Current parish or congregation:

City, State: _____

Are you enrolled in RCIA? _____

If yes, in which parish? _____

City, State _____

Have you ever petitioned for a declaration of nullity or dissolution of this marriage?

If yes, name of Tribunal: _____

Case number and date: _____

RESPONDENT'S GENERAL INFORMATION

Preferred language: English Español Tiếng Việt

Title: _____

First name: _____

Middle name: _____

Current last name: _____

Maiden name: _____

Gender: Male Female

Street address: _____

City, State: _____

Zip code: _____

Cell phone: _____

Home phone: _____

Email: _____

Date of birth: _____

Place of birth: _____

Has the Respondent ever been baptized? _____

Was he or she baptized at the time of the wedding? _____

Religion at the time of the wedding:

Current religion: _____

Are you and the Respondent in regular contact? _____

Will the Respondent participate in this case? _____

ADVOCATE

Name of your Advocate: _____

Advocate's parish: _____

OTHER MARRIAGES

If either you or the Respondent has had more than one marriage, please list them all in chronological order. Please include all marriages, even those that were not celebrated in religious ceremonies.

Attach to this Application Form all the documentation relative to each of these marriages: marriage certificate, civil divorce decree, and ecclesiastical decree of dissolution or nullity.

If either you or the Respondent has more than three marriages, please list them on a separate sheet of paper, including all the information requested below for each of the marriages.

PETITIONER

1) Name of spouse: _____

Date: _____

Place: _____

Was this the first marriage for the other spouse? _____

Has this spouse passed away? _____

If so, when? _____

Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If yes, name of Tribunal: _____

Case number and date: _____

2) Name of spouse: _____

Date: _____

Place: _____

Was this the first marriage for the other spouse? _____

Has this spouse passed away? _____

If so, when? _____

Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If yes, name of Tribunal: _____

Case number and date: _____

3) Name of spouse: _____

Date: _____

Place: _____

Was this the first marriage for the other spouse? _____

Has this spouse passed away? _____

If so, when? _____

Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If yes, name of Tribunal: _____

Case number and date: _____

RESPONDENT

1) Name of spouse: _____

Date: _____

Place: _____

Was this the first marriage for the other spouse? _____

Has this spouse passed away? _____

If so, when? _____

Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If yes, name of Tribunal: _____

Case number and date: _____

2) Name of spouse: _____

Date: _____

Place: _____

Was this the first marriage for the other spouse? _____

Has this spouse passed away? _____

If so, when? _____

Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If yes, name of Tribunal: _____

Case number and date: _____

3) Name of spouse: _____

Date: _____

Place: _____

Was this the first marriage for the other spouse? _____

Has this spouse passed away? _____

If so, when? _____

Has the Catholic Church granted a declaration of nullity or dissolution of this marriage? _____

If yes, name of Tribunal: _____

Case number and date: _____

BAPTISMAL INFORMATION

In order to prove the lack of baptism, it may be necessary to contact the churches where the parties have lived during their childhood. Therefore, please provide the following required information.

WHERE YOU HAVE LIVED

List all the places where you lived for six months or more until the age of 7. Indicate the approximate dates.

Name of city, town, or village	From	Until
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CHURCHES ATTENDED

List all the churches that you attended regularly until the age of 7.

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

WHERE THE RESPONDENT HAS LIVED

List all the places where the Respondent lived for six months or more until the age of 7. Indicate the approximate dates.

Name of city, town, or village	From	Until
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CHURCHES ATTENDED

List all the churches that the Respondent attended regularly until the age of 7.

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

WEDDING

Petitioner's age at the time of the wedding: _____

Respondent's age at the time of the wedding: _____

Date of the wedding: _____

Officiant: Religious minister
 Civil official
 Other (explain) _____

Name of officiant: _____

Place of marriage: _____

Street address: _____

City, State: _____

Zip code: _____

CHILDREN

Dates of birth or adoption of all the children you had or adopted:

Name	Date of birth or adoption
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Who now has legal custody of the children? _____

Are there current problems or disputes concerning visitation, custody, or support payments? _____

If there are current problems or disputes, describe briefly:

Is there any ongoing or pending litigation in the civil Courts between you and the Respondent? _____

If there are ongoing or pending litigations, describe briefly:

SEPARATION

Number of separations during the marriage: _____

Date of the first separation: _____

Date of final separation: _____

Length of married life until final separation: _____

What was the cause for the final separation?

If there is no hope for reconciliation with the Respondent, why?

CIVIL DIVORCE

Civil Divorce or Civil Annulment?

No-fault or For cause?

If it was for cause, please describe briefly:

Who applied for the divorce? _____

Date of divorce or annulment: _____

Court: _____

County, State: _____

WITNESSES

It is essential to demonstrate the lack of baptism of both the Respondent and the Petitioner.

Please name at least two witnesses who are able and willing to provide testimony about the lack of baptism.

The preferred witnesses are the parents of each party. Other competent witnesses may be older siblings, uncles, aunts or older cousins, as long as they can testify to the absence of baptism.

Before submitting their names, personally contact each witness and make sure that they are willing to testify.

FOR THE PETITIONER

Witness 1

Language preferred: English Español Tiếng Việt

Title and name: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Relationship to you: _____

Relationship to the Respondent: _____

Did this person agree to be a witness? _____

Witness 2

Language preferred: English Español Tiếng Việt

Title and name: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Relationship to you: _____

Relationship to the Respondent: _____

Did this person agree to be a witness? _____

Witness 3

Language preferred: English Español Tiếng Việt

Title and name: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Relationship to you: _____

Relationship to the Respondent: _____

Did this person agree to be a witness? _____

FOR THE RESPONDENT

Witness 1

Language preferred: English Español Tiếng Việt

Title and name: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Relationship to you: _____

Relationship to the Respondent: _____

Did this person agree to be a witness? _____

Witness 2

Language preferred: English Español Tiếng Việt

Title and name: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Relationship to you: _____

Relationship to the Respondent: _____

Did this person agree to be a witness? _____

Witness 3

Language preferred: English Español Tiếng Việt

Title and name: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Relationship to you: _____

Relationship to the Respondent: _____

Did this person agree to be a witness? _____

INTENDED MARRIAGE

For the purpose of this questionnaire, the Intended Spouse is the person that you want to marry in the Catholic Church.

First name of Intended Spouse: _____

Middle name: _____

Current last name: _____

Maiden name: _____

Street address: _____

City, State: _____

Zip code: _____

Religion: _____

Date of Birth: _____

Has your Intended Spouse ever been baptized? _____

Date of baptism: _____

Church or denomination of baptism:

City, State: _____

Current religion or denomination:

Current parish or congregation:

City, State: _____

If not baptized, why?

Is your Intended Spouse enrolled in RCIA? _____

If so, in which parish? _____

City, State _____

Is your Intended Spouse free to marry in the Catholic Church? _____

If no, explain briefly:

Was your Intended Spouse at fault in provoking your separation from the Respondent? _____

Explain briefly why:

Are you civilly married to your Intended Spouse? _____

If so, date of the celebration: _____

Name of officiant: _____

Place of celebration: _____

Street address: _____

City, State: _____

Zip code: _____

RCIA CERTIFICATE

The Pauline Privilege can only be applied after the baptism of the Petitioner. However, if you are already enrolled in RCIA, you may submit this application. For this purpose, you will need a letter signed by your Pastor or by the person in charge of RCIA at your parish. That letter, printed in the letterhead of your parish, should certify that you are enrolled in RCIA, and give an approximate date for when you are supposed to be baptized.