



**19TH ANNUAL ACCULTURATION SEMINAR FOR INTERNATIONAL PRIESTS
JUNE 22 - 26, 2020**

REGISTRATION FORM

TO BE COMPLETED BY PARTICIPANT

Space is limited. Please return completed registration form and verification form by April 1 (early bird deadline with savings of \$50) or by May 22 (deadline for regular registration).
Enclose a letter of recommendation from diocesan leadership or congregational major superior.

PART I : PERSONAL INFORMATION (PLEASE PRINT CLEARLY)

NAME: _____

PARISH/AFFILIATION _____

RESIDENCE ADDRESS: _____

CITY _____ STATE _____ ZIP _____

E-MAIL ADDRESS _____

PHONE _____ MOBILE _____

DATE OF BIRTH (MM/DD/YY) _____

EMERGENCY CONTACT:

NAME: _____ PHONE: _____

BACKGROUND:

Country of Origin _____ Home Diocese _____

Country of Ordination _____ Year of Ordination _____

Length of time in the US _____ Expected length of stay _____

Check one: Diocesan Priest or Member of a Religious Congregation

Name of Diocese/Congregation _____

LANGUAGE ABILITY:

Native Language _____

Other Languages _____

Fluency in English: Moderately GOOD _____ Very GOOD _____ EXCELLENT _____



EARNED DEGREES:

Degree	Field	Seminary / University
_____	_____	_____
_____	_____	_____
_____	_____	_____

PART II: SUMMARY OF EXPERIENCE (PLEASE PRINT CLEARLY)

Please provide a brief summary of your ministerial experience.

PART III: EXPECTATIONS (PLEASE PRINT CLEARLY)

Please describe your expectations of the program in terms of what you wish to learn and gain from this experience.

PLEASE NOTE: The residence halls are SMOKE FREE.

Signature _____

Print Name _____

Diocese of _____