

## ARCHDIOCESE OF BALTIMORE

DIVISION OF CLERGY PERSONNEL

320 Cathedral Street Baltimore, Maryland 21201

410 547-5427 \* Fax: 410 234-2953 \* clgypers@archbalt.org

## **INFORMATION FORM**

I. PERSONAL			
Your Name:			
(Arch)Diocese or Religious Order:			
Permanent Address:			
Phone:			
Place of Birth:			
Date of Birth:Date of Ordination:			
Social Security Number:			
Cell Phone			
Email:			
check here if you would like you like to receive Mass help requests via email, once you have received faculties			
Ministry site in Archdiocese of Baltimore			
Ministry Phone:Fax:			
Ministry job:			

## II. <u>DIOCESE/COMMUNITY</u>

Name of Diocese or Rel	igious Order:		
Name of Ordinary or Su	perior:		
Address:			
Phone:		Fax:	
Email:			
III. <u>LEGAL AND IMMIGRATION ISSUE</u> ( if a non US citizen)			
State Country of Citizen	ship:		
Passport Issued from:			
Passport Number/Expira	ntion Date:		
RI Info:			
List the legal documents (visa, green card, etc.) you have obtained in order to live, study and/or work in the United States? We will need copies of all immigration information.			
Document	Registration #	Expiration Date	