

*"I remind you to rekindle the gift of faith that is within you" (2 Tim 1:6)*



# THE PONTIFICAL NORTH AMERICAN COLLEGE

## APPLICATION for SPRING SESSIONS

Institute for Continuing Theological Education

00120 Vatican City State, Europe

SPRING 2021 (18 January – 29 March)

Holy Land Pilgrimage (30 March - 10 April) I wish to attend the optional Pilgrimage to Holy Land

SPRING 2022 (17 January-11 April)

Holy Land Pilgrimage (3 - 11 March) I wish to attend the optional Pilgrimage to Holy Land

NAME .....  
(Last) (First) (Middle)

ADDRESS .....

CITY ..... STATE ..... ZIP ..... COUNTRY .....

PHONE: ..... CELL: ..... FAX: .....  
(Country Code)

E-MAIL: .....  
(please print)

BIRTH: .....  
(Month) (Date) (Year)

PLACE OF BIRTH: .....  
(City) (State / Province) (Country)

NAME OF DIOCESE / RELIGIOUS COMMUNITY: .....

PRESENT ASSIGNMENT: .....

SEMINARY ATTENDED: .....

DATE OF ORDINATION OF THE PRIESTHOOD: .....  
(Month) (Date) (Year)

CITIZENSHIP .....



3. What personal benefit do you expect from the Continuing Formation module (s) you have selected?

4. Besides personal enrichment, how do you foresee that the ICTE would be able to fulfill your **ministerial needs** at this point in life?



7. Have you ever been treated for emotional illness, nervous disorders, or alcoholism?..... If “yes,” a medical statement from your physician indicating the present state of your physician indicating the present state of your health is required before the admissions Committee will consider your application dossier.

8. Do you or your physician know of any medical conditions that would inhibit your participation in the program? If yes, please describe.

9. Do you smoke?

**Physician’s Information**

Name (please print)		Telephone	
Address			
City	State/Province	Country	Zip/Post Code

<p><b>NOTE:</b></p> <p><i>The reception of this application form by the Pontifical North American College does NOT constitute acceptance.</i></p> <p>The ICTE Admissions Committee, through the Director of the Institute, grants acceptance into the Institute program.</p> <p>Such acceptance / non-acceptance is communicated shortly after all documentation is received in Rome. (within the year of acceptance)</p>	<p><b>PHOTO</b></p>	<p><b>PLEASE UPLOAD PASSPORT-SIZE PHOTOGRAPH</b></p> <p><i>This photo will be added to the photo list included in the program’s orientation kit. It helps participants to recognize one another.</i></p>
---	---------------------	--

Your Signature:

*Please scan your signature and upload it here as an image.*

Today’s date: .....