



Office of the Tribunal
Diocese of Scranton
300 Wyoming Avenue
Scranton, PA 18503
570-207-2246

PRELIMINARY APPLICATION FOR INTRODUCTION OF A FORMAL CASE

I. INFORMATION ABOUT THE PETITIONER

A. THE PETITIONER

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.

Current Legal Name: _____
First Middle Last Suffix

Maiden Name, *if applicable*: _____

Address: _____
Street Address (including Apt/Unit Number)

City State Zip Code Country

Phone: _____
Home Work Cell

E-mail: _____

Date of Birth: _____ Place of Birth: _____
(City, State, Country)

Highest Education Level: ☐ Elementary ☐ High School ☐ College ☐ Post-Graduate

Occupation: _____

B. PETITIONER'S RELIGIOUS STATUS

Baptismal Status: ☐ Baptized ☐ Unbaptized ☐ Unknown

❖ If you have been baptized, christened or sprinkled in any religion, specify which one:

☐ Catholic (Latin)

☐ Catholic (Eastern)

☐ Orthodox

☐ Protestant, what denomination? _____

❖ Date of Baptism: _____ Date received into the Catholic Church (*if applicable*): _____

❖ Present Religion: _____

C. PETITIONER'S PARENTS' INFORMATION

Father's Name: _____
First Middle Last Suffix

Relationship: ☐ Biological ☐ Adoptive ☐ Stepfather

Is your father living? ☐ Yes ☐ No ☐ Unknown

Would he be able to give testimony? ☐ Yes ☐ No

If yes, ☐ Written ☐ Oral

Mother's Name: _____
First Middle Last Suffix

Relationship: ☐ Biological ☐ Adoptive ☐ Stepmother

Is your mother living? ☐ Yes ☐ No ☐ Unknown

Would she be able to give testimony? ☐ Yes ☐ No

If yes, ☐ Written ☐ Oral

Are your parents still married to each other? ☐ Yes ☐ No

If either of them have died, were they still married at that point in time? ☐ Yes ☐ No

D. PETITIONER'S SIBLINGS' INFORMATION

How many brothers and sisters do you have?

_____ Older Brother(s) _____ Older Sister(s) _____ Multiples (Twins, Triplets, etc.)

_____ Younger Brother(s) _____ Younger Sister(s)

Are any of your siblings divorced/remarried? ☐ Yes ☐ No

❖ If yes, please indicate who: _____

E. PETITIONER'S MARRIAGE(S)

How many times have you been married (in a church, civil ceremony or even by common law) including your present union? _____

List your marriage information in order of marriage date (i.e., earliest marriage first).

Name of Spouse	Date of Marriage (mm/dd/yyyy)	Place of Marriage (City, State, Country)	Living?
a. _____	_____	_____	☐ Yes ☐ No
b. _____	_____	_____	☐ Yes ☐ No
c. _____	_____	_____	☐ Yes ☐ No
d. _____	_____	_____	☐ Yes ☐ No
e. _____	_____	_____	☐ Yes ☐ No

Has a Catholic Church court given a decision in any of these marriages, e.g., annulment, lack of form or privilege case? ☐ Yes ☐ No

- ❖ If yes, please give name of Tribunal, date and grounds. List below starting with earliest decision first.
- ❖ **If no, please contact the Tribunal as soon as possible.**

Name of Tribunal/Diocese	Date of Decision (mm/dd/yyyy)	Grounds
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____
e. _____	_____	_____

II. INFORMATION ABOUT THE RESPONDENT

A. THE RESPONDENT (The Respondent is the former spouse in the marriage being investigated.)

Have you contacted the Respondent to inform him/her that you have begun this process?

☐ Yes ☐ No **It is highly recommended that you share with your former spouse your desire to submit an application to our Tribunal, and if possible, seek his/her participation.**

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.

Current Legal Name: _____
First Middle Last Suffix

Maiden Name, *if applicable*: _____

Address: _____
Street Address (including Apt/Unit Number)

City State Zip Code Country

Phone: _____
Home Work Cell

E-mail: _____

Date of Birth: _____ Place of Birth: _____
(City, State, Country)

Highest Education Level: ☐ Elementary ☐ High School ☐ College ☐ Post-Graduate

Occupation: _____

B. RESPONDENT'S RELIGIOUS STATUS

Baptismal Status: ☐ Baptized ☐ Unbaptized ☐ Unknown

❖ If the Respondent has been baptized, christened or sprinkled in any religion, specify which one:

☐ Catholic (Latin)

☐ Catholic (Eastern)

☐ Orthodox

☐ Protestant, what denomination? _____

❖ Date of Baptism: _____ Date received into the Catholic Church (*if applicable*): _____

❖ Present Religion: _____

C. RESPONDENT'S PARENTS' INFORMATION

Father's Name: _____
First Middle Last Suffix

Relationship: ☐ Biological ☐ Adoptive ☐ Stepfather

Is the Respondent's father living? ☐ Yes ☐ No ☐ Unknown

Would he be able to give testimony? ☐ Yes ☐ No

If yes, ☐ Written ☐ Oral

Mother's Name: _____
First Middle Last Suffix

Relationship: ☐ Biological ☐ Adoptive ☐ Stepmother

Is the Respondent's mother living? ☐ Yes ☐ No ☐ Unknown

Would she be able to give testimony? ☐ Yes ☐ No

If yes, ☐ Written ☐ Oral

Are the Respondent's parents still married to each other? ☐ Yes ☐ No

If either of them have died, were they still married at that point in time? ☐ Yes ☐ No

D. RESPONDENT'S SIBLINGS' INFORMATION

How many brothers and sisters does the Respondent have?

_____ Older Brother(s) _____ Older Sister(s) _____ Multiples (Twins, Triplets, etc.)
_____ Younger Brother(s) _____ Younger Sister(s)

Are any of the Respondent's siblings divorced/remarried? ☐ Yes ☐ No

❖ If yes, please indicate who: _____

E. RESPONDENT'S MARRIAGE(S)

How many times has the Respondent been married (in a church, civil ceremony or even by common law) including his/her union with you? _____

List the Respondent's marriage information in order of marriage date (i.e., earliest marriage first). Include your own marriage to the Respondent in this list.

Name of Spouse	Date of Marriage (mm/dd/yyyy)	Place of Marriage (City, State, Country)	Living?
a. _____	_____	_____	☐ Yes ☐ No
b. _____	_____	_____	☐ Yes ☐ No
c. _____	_____	_____	☐ Yes ☐ No
d. _____	_____	_____	☐ Yes ☐ No
e. _____	_____	_____	☐ Yes ☐ No

Has a Catholic Church court given a decision in any of these marriages, e.g., annulment, lack of form or privilege case? ☐ Yes ☐ No

- ❖ If yes, please give name of Tribunal, date and grounds. List below starting with earliest decision first.
- ❖ **If no, please contact the Tribunal as soon as possible.**

Name of Tribunal/Diocese	Date of Decision (mm/dd/yyyy)	Grounds
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____
e. _____	_____	_____

III. THE MARRIAGE

Date of Ceremony: Civil _____ Catholic _____ Name of Officiant: _____

Name of Church/Hall: _____ Diocese: _____

Address: _____

1. Was this marriage convalidated (“blessed”) in the Catholic Church after a wedding ceremony by a civil official or non-Catholic minister? ☐ Yes ☐ No ☐ Not Applicable

If yes, please complete and submit the Supplemental Questions for Convalidation along with this application form.

❖ Date of Civil Ceremony _____

❖ Date of Catholic Church Ceremony _____

2. How old were you both at the time of the wedding?

❖ Civil Wedding You _____ Respondent _____

❖ Catholic Wedding You _____ Respondent _____

3. How long did you and the Respondent live together after the wedding and before the *final* separation?
____ Years ____ Months

IV. CHILDREN

4. Did you have any children with the Respondent? ☐ Yes ☐ No

❖ If yes, how many? _____

❖ What were their dates of birth? _____

V. CHARACTERISTICS

5. The following characteristics often appear in troubled courtships and marriages. Please check whether you feel this characteristic was yours, the respondent's or both. You may include a brief comment on your observation of the characteristic.

<u>Characteristic</u>	<u>Yourself</u>	<u>Respondent</u>	<u>Comments</u>
Abuse.....			
Physical	☐	☐	
Emotional	☐	☐	
Verbal	☐	☐	
Drugs	☐	☐	
What drugs were used?			
When did the use of drugs begin?			
Excessive Drinking	☐	☐	
Excessive Spending	☐	☐	
Problems in Intimate Relations.....			
Avoidance	☐	☐	
Divergent Expectations	☐	☐	
Forced	☐	☐	
Unsatisfactory	☐	☐	
Proven Infidelity.....			
Before the Wedding	☐	☐	
During the Marriage	☐	☐	
Preoccupations Outside Home.....			
Peer Relationships	☐	☐	
Recreation	☐	☐	
Excessive Working (Workaholic)	☐	☐	
Pressure to Marry.....			
Pregnancy	☐	☐	
Parents	☐	☐	
Yourself	☐		
Respondent		☐	
Age (Biological Clock)	☐	☐	
Lifestyle	☐	☐	
Rejection by Family/Friends	☐	☐	
Rebound from Prior Relationship	☐	☐	
Extreme Mood Swings.....	☐	☐	
Divorce as an acceptable solution to an unhappy or unsuccessful marriage.....	☐	☐	
Use of Pornographic Material.....	☐	☐	
Homosexuality/Gender Dysphoria.....	☐	☐	
Serious Medical Concerns.....	☐	☐	

VI. SEPARATION AND DIVORCE

6. How many separations were there? _____

7. When? (indicate years and months) _____

8. When was the final separation? _____

9. Date of Divorce Decree: _____ Place of Court: (County/State) _____ (Country) _____

VII. THE PETITIONER'S INTENDED/CURRENT SPOUSE

These questions refer to the person to whom you are presently married, are planning to marry or with whom you have a serious relationship.

Relationship (check one): ☐ Current Spouse ☐ Intended Spouse ☐ Serious Relationship

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.

Current Legal Name: _____
First Middle Last Name Suffix

Maiden Name, *if applicable*: _____

❖ Baptismal Status: ☐ Baptized Catholic (Latin) ☐ Baptized Protestant ☐ Unbaptized
☐ Baptized Catholic (Eastern) ☐ Baptized Orthodox ☐ Unknown

How many times has your intended/current spouse been married (in a church, civil ceremony, or common law)?

List your intended/current spouse's marriage information in order of marriage date (i.e., earliest marriage first). Include your own marriage to this person in this list.

Name of Spouse	Date of Marriage (mm/dd/yyyy)	Place of Marriage (city, state, country)	Living?
a. _____	_____	_____	☐ Yes ☐ No
b. _____	_____	_____	☐ Yes ☐ No

Has a Catholic Church court given a decision in any of these marriages, e.g., annulment, lack of form or privilege case? ☐ Yes ☐ No

- ❖ If yes, please give name of Tribunal, date and grounds. List below starting with earliest decision first.
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VIII. MISCELLANEOUS

9. Are you enrolled in the *Order of Christian Initiation of Adults* (OCIA) or wish to become Catholic?

☐ Yes ☐ No

10. Have you previously discussed your marriage problems with the Scranton Tribunal or any other Tribunal?

☐ Yes ☐ No If yes, when and where? _____

IX. SIGNATURES AND REVIEW

✍ Date

✍ Signature of Petitioner

Parish of Petitioner (include city and state)

Name of Priest/Deacon

PARISH SEAL:

✍ Signature of Priest/Deacon

Use the following checklist to ensure that you are supplying all the necessary materials. All of the following must be given to the interviewer (priest/deacon) for a thorough review before he submits them to the Tribunal. Please keep copies of these documents for your records.

- ☐ Fact Sheet
- ☐ Preliminary Application (signed, dated, and sealed by the priest or deacon)
- ☐ Petition (signed and dated)
- ☐ (For a Catholic Petitioner) Baptismal or Profession of Faith Certificate dated within the last 6 months
- ☐ Civil Marriage License if non-Catholic
- ☐ Supplemental Questions for Convalidation (if applicable)
- ☐ Final Divorce Decree (not the property settlement, bill of complaint, nor interlocutory decree) signed by the judge



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**PETITION FOR
DECLARATION OF NULLITY
(LIBELLUS)**

Please type your petition within the space provided below. DO NOT USE a separate sheet.

I hereby petition the Tribunal of the Diocese of Scranton for a Declaration of Nullity of my marriage according to the Canon Law of the Catholic Church.

I name the following as knowledgeable witnesses who are able and willing to provide testimony in this case:

1. _____ 2. _____ 3. _____
Relationship: _____ Relationship: _____ Relationship: _____

✍ Petitioner Signature

✍ Date

DO NOT WRITE BELOW THIS LINE – FOR TRIBUNAL USE ONLY

DECREE OF ACCEPTANCE:

In accordance with canon 1676 §1, and whereas this Tribunal is competent by virtue of canon 1672 1° 2° 3°, I hereby accept the Petition for adjudication in First Instance. Furthermore, I hereby cite the parties and the Defender of the Bond and invite them to offer comments and observations regarding the merits and facts contained herein. This decree is to be communicated to the parties and the Defender of the Bond, and they are to respond within fifteen (15) days of the notification. Given in the Tribunal of the Diocese of Scranton, Pennsylvania on _____.

✍ Notary

✍ Judicial Vicar