



DIOCESE OF MEMPHIS

Chancery

5825 Shelby Oaks Drive
Memphis, TN 38134
Tel.: (901) 373-1200
Fax: (901) 373-1268

For Chancery Use Only

Case Name: _____

Prot. No.: _____

Received Date: _____

Notary: _____

Petition to the Bishop of Memphis to Invoke the PAULINE PRIVILEGE

YOUR EXCELLENCY:

I, _____,
(Full name of Petitioner, including maiden name if applicable)

Please check the applicable box:

- ☐ sincerely interested in receiving baptism in the Catholic Church,
☐ having already received baptism in the Catholic Church,

hereby petition an investigation to determine my right to use the PAULINE PRIVILEGE
in order to marry _____, a Catholic.

As an unbaptized person, I was married to _____,
(Full name of the Other Party, including maiden name)

also unbaptized, on _____ in the year _____. This marriage
ended in a civil divorce, granted on _____ in the year _____.

There is no hope for any reconciliation.

I understand that Your Excellency or your delegate must conduct the Canonical
Interpellations of the other party as required by canon 1144. ***I agree to abide by the
decision of the Church in my case, and understand that no guarantee can be given
of an affirmative decision or of a definite time within which the decision will be
forthcoming.***

Petitioner's Signature

Address _____

City, State, Zip _____

Email _____

Petitioner Home Phone _____

Petitioner Cell Phone _____

Petitioner Work Phone _____

Date: _____

Signature of Priest/Deacon/Parish Minister

PRINT Name _____

Parish _____

Address _____

City, State, Zip _____

Email _____

FOR CHANCERY USE ONLY

Date Received _____ Notary's Name: _____

PLEASE INCLUDE WITH THIS PETITION:

- ☐ **Marriage Certificate**
- ☐ **Final Divorce Decree**
- ☐ **Baptismal Certificate of Petitioner [if already baptized]**
- ☐ **Baptismal Certificate of proposed spouse**

DATA CONCERNING THE OTHER PARTY

Please type or neatly print the following data about the Other Party (i. e., your spouse in the marriage you are seeking to have dissolved).

Other Party's Current Legal Name: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Maiden Name (if different): _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

(If you do not have an address for the Other Party, please provide the name of a relative "in care of" whom we can attempt to reach him or her.)

Name: _____

Relationship of this Person to the Other Party: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

If you have no address at all for the Other Party, it will be very difficult if not impossible to verify the facts necessary to authorize the use of the Pauline Privilege. Please consult the Chancellor's Office to determine whether a petition to invoke the Pauline Privilege is appropriate, or whether some other approach would be better.

Thank you.

WITNESSES CONCERNING THE FACT THAT THE PARTIES WERE NOT BAPTIZED

Please name at least two witnesses who are able and willing to provide testimony about your religious background, and two witnesses able and willing to provide similar testimony concerning the Other Party. If you wish to name more than two witnesses, please copy this page and include the additional witnesses.

The preferred witnesses are the parents of the person. Other competent witnesses are older siblings, uncles, aunts or older cousins who have direct contact with the party throughout life, and knowledge concerning the religious practice of the family. If no other witnesses are available, younger brothers and sisters of the unbaptized party may be named. Please do not name children of the marriage in question. Please notify the witness that you have named them in connection with your petition and that they should expect to hear from the Chancery.

In addition to witnesses, and sometimes in place of their testimony, it is possible to submit documentary evidence that establishes a person was never baptized. If there is such documentary evidence, please submit that with your petition.

Witnesses Regarding the Petitioner:

Name: _____

Relationship to the Petitioner: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Name: _____

Relationship to the Petitioner: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Witnesses Regarding the Other Party [Respondent]:

Name: _____

Relationship to the Respondent: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Name: _____

Relationship to the Respondent: _____

Proper Salutation: (*Please Circle:* Mr. Mrs. Ms. Dr. Other: _____)

Street Address: _____ City: _____

State: _____ Zip Code: _____ Country (if outside USA) _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

**PAULINE PRIVILEGE
DEPOSITION OF THE PETITIONER**

Acknowledging that I fully understand the nature of an oath (i.e., the calling upon God to witness the truth of the statements made), I promise that I will tell the truth, the whole truth, and nothing but the truth in this deposition, so help me, God!

(Please type or neatly print all answers. If additional room is needed, please use the back of the questionnaire. Thank you.)

1. Full name (incl. Maiden) _____
If you entered the marriage in question using yet a different name, please attach an explanation.
Street Address: _____
City: _____ State: _____ ZIP Code: _____
Phone: Home: _____ Cell: _____
Work: _____ E-mail: _____
Date of Birth _____ Place _____
Religion at time of the marriage in question: _____
Current Religion: _____

Concerning Your Own Religious Background:

2. During your childhood and youth (birth through age 16), were you ever baptized in the Catholic Church or any other Christian church or denomination? ☐ **Yes** ☐ **No**
3. Since age 16 until the time you entered the marriage in question, were you ever baptized in the Catholic Church or any other Christian church or denomination? ☐ **Yes** ☐ **No**

If you responded "yes" to either question 2 or 3, then a petition to invoke the Pauline Privilege is not appropriate unless there is significant reason to doubt the validity of that baptism. If there is a question concerning whether this was valid Christian baptism, please indicate when, where, and in what religious tradition the baptism took place.

4. If you were not baptized in your infancy, childhood or youth, please explain: a) how you know this fact and b) why you did not receive baptism in those years.

5. What is your father's name? _____

Is he living? ☐ Yes ☐ No

(If so and he is able and willing to testify, please include him in your list of witnesses.)

To what religion did his/her father belong? _____

Did he practice this faith actively? ☐ Yes ☐ No _____

If he was from a Christian tradition, what were his views on the importance of baptism?

6. What is your mother's name? _____

Is she living? ☐ Yes ☐ No

(If so and she is able and willing to testify, please include her in your list of witnesses.)

To what religion did his/her mother belong? _____

Did she practice this faith actively? ☐ Yes ☐ No _____

If she was from a Christian tradition, what were her views on the importance of baptism?

7. Were you ever under the guardianship of someone other than your parents? ☐ Yes ☐ No
(If so, on the reverse please give the name(s) of your guardian(s) and answer the same questions about them as were posed concerning your parents in ## 7 and 8.)

8. Were any of your siblings baptized? ☐ Yes ☐ No
If so, please complete the following information for each of your siblings.

| Name of Sibling | Birth year | Church of Baptism | Date of Baptism |
|-----------------|------------|-------------------|-----------------|
| | | | |
| | | | |
| | | | |

9. Did you ever attend any church and/or Sunday school, even if there was no formal affiliation? ☐ Yes ☐ No
(If so, please list all churches and Sunday Schools you attended.)

| Name of Church | Street address/city/state | Years |
|----------------|---------------------------|-------|
| | | |
| | | |
| | | |

Concerning the Religious Background of the Other Party (i.e., your former spouse):

10. Full name (incl. Maiden) _____
If he/she entered the marriage in question using yet a different name, please attach an explanation.

Street Address: _____

City: _____ State: _____ ZIP Code: _____

Phone: Home: _____ Cell: _____

Work: _____ E-mail: _____

Date of Birth _____ Place _____

Religion at time of the marriage in question: _____

Current Religion: _____

- 11 Since birth until the time he/she married you, was the other party ever baptized in the Catholic church or any other Christian church or denomination?

☐ Yes ☐ No ☐ I do not know

If you responded "yes" then a petition to invoke the Pauline Privilege is not appropriate unless there is significant reason to doubt the validity of that baptism. If there is a question concerning whether this was valid Christian baptism, please indicate when, where, and in what religious tradition the ceremony took place. Attach the certificate of the baptism if at all possible.

12. If the Other Party was not baptized in childhood or youth, please explain to the best of your knowledge: a) how you know this fact and b) why he/she did not receive baptism in those years.

13. What is the name of the Other Party's father? _____

Is he living? ☐ Yes ☐ No ☐ I do not know

(If so and he is able and willing to testify, please include him in your list of witnesses for the Other Party.)

To what religion did his/her father belong? _____

Did he practice this faith actively? ☐ Yes ☐ No ☐ I do not know

If he was from a Christian tradition, what were his views on the importance of baptism?

14. What is the name of the Other Party's mother? _____

Is she living? ☐ Yes ☐ No ☐ I do not know

(If so and she is able and willing to testify, please include her in your list of witnesses for the Other Party.)

To what religion did his/her mother belong? _____

Did she practice this faith actively? ☐ Yes ☐ No ☐ I do not know

If she was from a Christian tradition, what were her views on the importance of baptism?

15. Was the Other Party ever under the guardianship of someone other than his/her

parents? ☐ Yes ☐ No ☐ I do not know

16. During the period of your common life, did the Other Party receive baptism?
☐ Yes ☐ No

How do you know this? _____

17. Subsequent to your separation and divorce from the Other Party, has he/she been baptized into any Christian Church or denomination? ☐ Yes ☐ No ☐ I do not know

Concerning the Marriage in Question:

18. Date of Marriage _____ Place: _____

Who officiated? ☐ priest ☐ Christian minister ☐ rabbi ☐ civil official
☐ other _____

19. Was this the first marriage for each of you? ☐ Yes ☐ No (If not, please explain.)

20. How many children were born of this marriage? _____

How many of those children are still minors? _____

Who has custody of the minor children? _____

21. What was the cause of the breakup of this marriage?

22. Have either of you entered any other marriages? ☐ Yes ☐ No

If so, please provide the following information for each marriage. If more than one marriage, please write the pertinent information on the back of this page.

Former Spouse of ☐ Petitioner ☐ Respondent:

First Name: _____ Middle Name: _____

Surname: _____ Maiden Name (if different): _____

His/Her Religion at time of marriage: _____

Baptism: ☐ Catholic ☐ Other _____ ☐ Not baptized

Marriage date: _____

☐ Catholic ceremony ☐ Other religious ceremony ☐ civil ceremony

Place of marriage: City: _____ State: _____

Had this person been married prior to your union? ☐ Yes ☐ No

Number of prior marriages: ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ other _____

Divorce date: _____ and/or Death date: _____

Concerning the Person You Wish to Marry in the Church:

23. Full name (incl. Maiden) _____
Street Address: _____
City: _____ State: _____ ZIP Code: _____
Phone: Home: _____ Cell: _____
Work: _____ E-mail: _____
Date of Birth _____ Place _____
Current Religion: _____
Has he/she been baptized?
☐ Yes ☐ No
If so, where? _____ When? _____
(If baptized, please enclose a copy of the baptismal certificate.)
24. How long have you known him/her? _____
25. Did your friendship with him/her play any part whatsoever in your separation and divorce from the Respondent? Please explain.

26. Are you and the person you wish to marry in the Catholic Church already united by any civil or religious exchange of marriage vows? ☐ Yes ☐ No
If so, please give the date: _____ and place: _____
(Please enclose a copy of your certificate of marriage.)
27. Do you and the person you wish to marry in the Church have any children? ☐ Yes ☐ No
If so, how many? _____
Have they been baptized in the Catholic Church? ☐ Yes ☐ No
(If so, please enclose copies of their baptismal certificates.)
28. Does the person you wish to marry have any previous marriages? ☐ Yes ☐ No
29. Is the person you wish to marry free to marry according to the laws of the Catholic Church?
Please explain. _____

I verify that the testimony given above, to the best of my knowledge, is the truth, the whole truth, and nothing but the truth.

Signature of the Petitioner

Date

Signature of the Priest/Deacon/Chancery Notary

PRINT Name of Priest/Deacon, etc.

Parish: _____

(Parish/Chancery Seal)