

INITIAL INTERVIEW OF COUPLE

**Note to interviewer:** These questions provide an opportunity for you to assist couples in developing a deeper understanding of the Church’s teaching on marriage. Please be prepared to explain the significance of the information being sought. Also, please provide your impressions of the couples’ readiness for marriage based on the responses they have given (see the checklist).

<b>Rehearsal</b>	Date:				Place:			
<b>Marriage</b>	Date:				Place:			
	Will there be a Mass?	Yes			Presider:			
		No						
		<b>Groom</b>				<b>Bride</b>		
<b>Name</b>	Family							
	Given							
<b>Address</b>	Street							
	City, Prov.							
	Postal Code							
<b>Phone</b>	Home							
	Cell							
<b>Occupation/Employer</b>								
<b>Marital status</b> (if previously married see Form 6)		Never married	Divorced	Widow	Never married	Divorced	Widow	
<b>Birth date</b>								
<b>Age at marriage</b>								
<b>Birth place</b>								
<b>Religion &amp; Rite</b>								
<b>Baptism</b>	Parish & date							
	City & Prov.							
<b>Confirmation</b>								
Describe your current religious practice								
<b>Father</b>	Name							
	Birth place							
	Religion/Rite							
<b>Mother</b> (name at birth)	Name							
	Birth place							
	Religion/Rite							
How long have you known each other?								
How long have you been engaged?								
<b>Witnesses to marriage</b>	Name:							
	Address:							
	Postal Code							
	Phone No.							

\_\_\_\_\_  
Name of Interviewer – please print

\_\_\_\_\_  
Signature of Interviewer

Date of interview: \_\_\_\_\_

INDIVIDUAL INTERVIEW –  Bride  Groom

**Note to interviewer:** The parties are to be interviewed separately.

Do you swear to answer the following questions truthfully?	Yes	No
<b>Marriage Preparation</b>		
1. Have you completed a marriage preparation program?	Yes	No
If yes, where?		
<b>Freedom to Marry</b>		
2. Are you entering this marriage freely and of your own choice?	Yes	No
3. Have you ever been married before?	Yes	No
4. In taking on the responsibilities of marriage, do you anticipate any extraordinary emotional, psychological, and/or financial difficulties?	Yes	No
5. Are you being pressured by any person or circumstance to enter into this marriage against your will?	Yes	No
6. Is your fiancé(e) being pressured?	Yes	No
<b>Impediments and Concerns</b>		
7. Are you related to your fiancé(e) by family, marriage or adoption?	Yes	No
8. Are you aware of any medical or psychological conditions which would make it not possible for children to be born of this marriage?	Yes	No
9. Have you or your fiancé(e) ever received treatment for any emotional or psychological conditions, or suffered from drug, gambling, or alcohol addiction?	Yes	No
<b>Consent</b>		
10. Do you intend a) to enter a life-long union, b) to accept children as a gift from God, c) to remain faithful to your intended spouse?	Yes	No
11. To the best of your knowledge, does your fiancé(e) share the same understanding of marriage (see #10)?	Yes	No
<b>Faith Within Your Marriage</b>		
12. (CATHOLIC) Do you intend to do all that is possible to practice your Catholic faith and to baptize and educate your children in that faith?	Yes	No
(NON-CATHOLIC) Are you aware of your fiancé(e)'s obligation to practice his/her Catholic faith and to baptize and educate your children in the Catholic faith, if at all possible?	Yes	No
<b>Minors (under 18 years of age)</b>		
13. Do your parents consent to this marriage?	Yes	No

Care should be taken to determine the presence of other impediments: public propriety, crime, abduction, vows excluding marriage, etc. All cases of doubt are to be referred to the Chancery Office (see Form 2A)

**If “YES” to Questions 3-9 or “NO” to Questions 10-12, please explain.** (For noting additional concerns or impressions, use the back of this Form or the Checklist).

Signature of Groom/Bride: \_\_\_\_\_

Given at \_\_\_\_\_ Date \_\_\_\_\_

Signature of Interviewer: \_\_\_\_\_



**INSTRUCTIONS:**

This form should be completed where the priest does not know the party well enough to determine the freedom to marry, the party is not able to provide a Catholic Baptism Certificate, or the party is not at least 18 years of age or in other ways does not appear sufficiently mature for marriage.

The priest or his delegate must interview the witness. The witness should be a parent, sibling or close relative of the party concerned. **Where a family member is not available, two witnesses should be interviewed.**

<b>CONCERNING PROOF OF FREEDOM TO MARRY OF:</b> <input type="checkbox"/> <b>Groom</b> <input type="checkbox"/> <b>Bride</b>			
Name of witness (print)			
Relationship to groom/bride:		# of years of relationship	

**OATH OF WITNESS:**

Are you willing to be truthful in the answers you are about to give? \_\_\_\_\_

**PROOF OF FREEDOM TO MARRY:**

1. To the best of your knowledge, was this person ever married? \_\_\_\_\_
2. If "Yes":
  - a) Name of Spouse \_\_\_\_\_
  - b) Date of Marriage \_\_\_\_\_
  - c) Place of Marriage \_\_\_\_\_  
(City & Church or Other)
  - d) Presider at marriage \_\_\_\_\_  
(Catholic Minister, Non-Catholic Minister, Civil Official)
3. Do the parents/guardians have any objections to this marriage? \_\_\_\_\_
4. To your knowledge, is he/she entering into this marriage of his/her own free will? \_\_\_\_\_
5. To your knowledge, does he/she intend a "permanent marriage"? \_\_\_\_\_
6. Have you any reason to believe that he/she intends to exclude children from this marriage?  
\_\_\_\_\_
7. To your knowledge, does he/she attach any condition, qualification or limit on his/her proposed marriage? \_\_\_\_\_
8. In your personal view, do you consider this person sufficiently mature and ready for marriage?  
\_\_\_\_\_

If not, why not? \_\_\_\_\_

Place of interview: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Interviewer (print)

\_\_\_\_\_  
Signature of Interviewer

\_\_\_\_\_  
Name of Witness (print)

\_\_\_\_\_  
Signature of Witness

**INSTRUCTIONS:**

Please complete this form if the bride or groom declares she/he has been baptized but cannot furnish a baptism certificate. This form is not an acceptable substitute if the baptism took place according to a rite of the Catholic Church.

The priest or his delegate must interview the witness. The witness should be a parent, sibling or godparent of the party concerned.

The priest must be satisfied that the baptism likely took place. If the priest is not so satisfied, then he must not submit this form. Rather, he should prepare a letter explaining his reasons for not accepting a declaration of baptism.

<b>CONCERNING THE BAPTISMAL STATUS OF:</b>		
Name (print):	Groom	Bride

**QUESTIONS FOR WITNESS:**

1. Are you willing to be truthful in the answers you are about to give? \_\_\_\_\_
2. How long have you known this person? \_\_\_\_\_
3. What is your relationship to this person? \_\_\_\_\_

**QUESTIONS ABOUT BAPTISMAL STATUS:**

1. Was this person ever baptized? \_\_\_\_\_
2. If so, in what church or faith group? \_\_\_\_\_
3. When? \_\_\_\_\_
4. Who were the sponsors?
  - 1- \_\_\_\_\_
  - 2- \_\_\_\_\_
5. Were you present? \_\_\_\_\_
6. If not, how do you know of the baptism? \_\_\_\_\_

Place of interview: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Interviewer (print)

\_\_\_\_\_  
Signature of Interviewer

\_\_\_\_\_  
Name of Witness (print)

\_\_\_\_\_  
Signature of Witness

**Note:** This form must accompany requests for marriage dispensations or permissions. Be sure to fill in both sides of the form. If members of your parish are going to be married by any priest other than yourself, you must sign the Delegation to Assist Form on the back.

Diocese of Marriage			
Parish of Marriage		Date of Marriage	
<b>Groom</b>		<b>Bride</b>	
		Surname, first name	
		Address	
		Age/Date of Birth	
		Religion/Rite	

Please grant the following	For Chancery use only
<b>DISPENSATION</b>	
<input type="checkbox"/> Disparity of Cult	<input type="checkbox"/> Granted
<input type="checkbox"/> Disparity of Cult <i>ad Cautelam</i>	<input type="checkbox"/> Granted
<input type="checkbox"/> *Consanguinity	<input type="checkbox"/> Granted
<input type="checkbox"/> *Affinity	<input type="checkbox"/> Granted
<input type="checkbox"/> Canonical Form	<input type="checkbox"/> Granted
(*Include a Schema of Relationship)	
<b>PERMISSION</b>	
<input type="checkbox"/> Mixed Religion	<input type="checkbox"/> Granted
<input type="checkbox"/> Teenage Marriage	<input type="checkbox"/> Granted
<input type="checkbox"/> <i>Nihil Obstat</i> – Second Marriage	<input type="checkbox"/> Granted
<input type="checkbox"/> Testimonial Letter	<input type="checkbox"/> Granted
<input type="checkbox"/> <i>Sanatio</i> (include explanatory letter)	<input type="checkbox"/> Granted

I testify that the above-named parties are free to marry.

\_\_\_\_\_  
Signature of Priest

\_\_\_\_\_  
Bishop/Vicar General/Chancellor/Delegate

\_\_\_\_\_  
Parish and Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date Seal

**NIHIL OBSTAT:** In consideration of the above petition and having reviewed the documents submitted, we grant our NIHIL OBSTAT for the celebration of the above marriage (*servantis de jure adhuc servandis*).

Given at \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Bishop/Vicar General/Chancellor/Delegate

**Reasons for Requesting Dispensations/Permissions** (Check as many as may apply)

<b>1. Disparity of Cult (Incl. Ad Cautelam) and Mixed Religion</b>	
SUFFICIENT IN THEMSELVES	SUPPLEMENTARY REASONS
Spiritual good of the couple	All is prepared for the wedding
Danger of an invalid marriage outside the church	Widowed with children
Removal of serious scandal	Special merits of the couple
Hope of conversion	Mutual help in advanced age
Validation of an invalid marriage	Advanced years
Danger of apostasy if dispensation is denied	Pregnancy
	Undue familiarity of the parties known or suspected
<b>2. Canonical Form</b>	
To achieve family harmony or avoid family alienation	Active participation of the non-Catholic party in his/her church
To obtain parental agreement to the marriage	Spiritual good of the couple
To recognize relationship or special friendship with a non-Catholic minister	To permit the marriage in a church that has particular importance to the non-Catholic
<b>3. Consanguinity or Affinity</b>	
There is no proximate danger to possible children	There would be no scandal if dispensation is granted
Spiritual good of the couple	
<b>4. Teenage Marriage</b>	
Spiritual good of the couple	The couple have unusual maturity for their age
The family relationships are strong and supportive	The couple will be able to support a home and undertake the responsibilities of marriage
The couple have prepared themselves responsibly for the marriage	Real danger to their faith may result if there is any further delay

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**PERMISSION OF PASTOR**  
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Permission of their/his/her Pastor is hereby granted to \_\_\_\_\_ to be married in the Parish of \_\_\_\_\_ in the Diocese of \_\_\_\_\_.

**Note:** This permission is given by the Pastor to his parishioner(s) who are to be married in another parish.

Pastor: \_\_\_\_\_ Date \_\_\_\_\_

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**DELEGATION TO ASSIST**  
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The Undersigned hereby grants \_\_\_\_\_, who does not have faculties in this Archdiocese, delegation to assist at the marriage of: \_\_\_\_\_ in this Parish/Mission of \_\_\_\_\_.

**Note:** This permission is granted only to priests who have no ordinary faculties in our archdiocese to witness a marriage here. It is not needed if the visiting priest is from our archdiocese.

Pastor: \_\_\_\_\_ Date \_\_\_\_\_

PREVIOUS RELATIONSHIPS and NATURAL OBLIGATIONS

(attach additional forms if necessary)

**PREVIOUS COMMON-LAW RELATIONSHIPS**

<b>Groom</b>			
1. Do you have children from any previous relationship? (If no, please go to question #5)		Yes	No
If yes, how many?			
2. What provisions have been made for their welfare?			
3. What support provisions, if any, have been made for your previous partner?			
4. Please describe all previous common-law relationships:			
<i>Relationship 1</i>	Duration: _____ years/months	Start date:	
		End date:	
<i>Relationship 2</i>	Duration: _____ years/months	Start date:	
		End date:	
5. Do you think this will have adverse effects on your intended marriage?			

<b>Bride</b>			
1. Do you have children from any previous relationship? (If no, please go to question #5)		Yes	No
If yes, how many?			
2. What provisions have been made for their welfare?			
3. What support provisions, if any, have been made for your previous partner?			
4. Please describe all previous common-law relationships:			
<i>Relationship 1</i>	Duration: _____ years/months	Start date:	
		End date:	
<i>Relationship 2</i>	Duration: _____ years/months	Start date:	
		End date:	
5. Do you think this will have adverse effects on your intended marriage?			

(continued on reverse)



**FOR EACH PREVIOUS MARRIAGE**

<b>Groom</b>	<b>First Marriage</b>	<b>Second Marriage</b>
Name of spouse		
Religion & baptismal status		
Date of marriage		
Place of marriage		
<b><u>In case of death:</u></b> Date of death of spouse*		
<b><u>In case of divorce:</u></b> Date of divorce decree*		
<b><u>In case of nullity:</u></b> Date of Declaration of Nullity*		

**FOR EACH PREVIOUS MARRIAGE**

<b>Bride</b>	<b>First Marriage</b>	<b>Second Marriage</b>
Name of spouse		
Religion & baptismal status		
Date of marriage		
Place of marriage		
<b><u>In case of death:</u></b> Date of death of spouse*		
<b><u>In case of divorce:</u></b> Date of divorce decree*		
<b><u>In case of nullity:</u></b> Date of Declaration of Nullity*		

\*Attach Death Certificate, Decree of Divorce, or Decree of Nullity for **each** marriage where applicable.

Interviewer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTICE OF MARRIAGE FOR THE BAPTISM RECORD**

(to be sent to the Parish of Bride/Groom's Baptism)

**Name of Bride/Groom:** \_\_\_\_\_

**Parish of Baptism:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Notice of Marriage:**

On \_\_\_\_\_ in \_\_\_\_\_ parish in  
Month/Day/Year Name of Church

\_\_\_\_\_,  
Address of Church

\_\_\_\_\_ who was baptized on \_\_\_\_\_  
Name of Bride/Groom Month/Day/Year

in \_\_\_\_\_  
Name and Place of Parish of Baptism

contracted a valid and licit marriage with \_\_\_\_\_  
Name of Groom/Bride

who was baptized on \_\_\_\_\_ in \_\_\_\_\_  
Month/Day/Year Name and Place of Parish of Baptism

\_\_\_\_\_.

Officiating Minister: \_\_\_\_\_ Date: \_\_\_\_\_

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**For the Parish of Baptism:**

This is to certify that I have entered this marriage in the person's Baptismal Register.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this completed form to:**

Office of the Chancellor, Archdiocese of Grouard-McLennan,  
10301 102 Street, Grande Prairie AB T8V 2W2

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**For the Chancellor's Office:**

This is to certify that I have entered this marriage in the copy of the Baptismal Register kept in the Chancery of the Archdiocese of Grouard-McLennan.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This document is finally returned by the Chancery Office to the Parish where the Marriage took place.

CHECKLIST OF REQUIRED DOCUMENTS FOR MARRIAGE

<i>(Date of Marriage)</i>		<i>(Place of Marriage)</i>	
For Marriage of:		and	
	<i>Bride</i>		<i>Groom</i>
<b>FOR ALL MARRIAGES:</b>			
Form 1	Initial Interview with Couple		
Form 2	Separate Interview		
	Bride		
	Groom		
Birth Certificates			
	Bride		
	Groom		
Baptismal Certificates issued within past 6 months (for Catholics)			
Certificate of Baptism or Form 2.7d Evidence of Baptismal Status (for non-Catholics)			
	Bride		
	Groom		
Valid Provincial Marriage License (issued within 3 months of the marriage)			
Certificate of completion of Pre-Cana course			
<b>AS REQUIRED:</b>			
Form 3	Proof of Freedom to Marry		
	Bride		
	Groom		
Form 4	Evidence of Baptismal Status		
Form 5	Request for Necessary Dispensations, Permission & Testimonial Letter, and Pastoral Delegation to Assist		
Form 6	Status of Previous Common-Law Relationship(s) and/or Marriage(s) ( <i>attach Death Certificate, Decree of Divorce, Decree of Nullity, as applicable</i> )		
Form 7	Notice of Marriage for the Baptism Record ( <i>when marriage is <u>not</u> held in the parish where Catholic party/parties were baptized</i> )		
NOTES (comments, concerns, impressions) <i>please date and initial</i>			

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_