Institute of Religious Formation
Application for Admission

U.S. $50 Application Fee Due
When application is filed
(Non-refundable; not applicable to tuition)
Session starting ____Year □ Aug. □ Jan.
(with approval only)

Return this application to
Sr. Maria Hughes, ASC
Institute of Religious Formation
Catholic Theological Union
5401 S. Cornell, Chicago, IL 60615

Print Name Exactly As It Shows On Passport

Name_____
Surname **First Name** **Middle Name**

Mailing Address: _____

Telephone_____ Fax_____ E-mail_____

Date of Birth_____/_____/_____ Place of Birth_____
Month Day Year City State/Region Country

Title of religious
congregation/order_____Congreg.Initials_____Diocese_____
(diocesan priests only)

Name & address of person to be billed _____

United States Person to be notified in emergencies_____Phone_____

Address_____

Are you a U.S. Citizen? ☐ Yes ☐ No
If no, country of citizenship _____ United States Social Security Number_____-____-_____

Will you be attending an English Language School prior to the IRF? ☐ Yes ☐ No

Colleges and Universities attended and/or currently attending. (Do not mail this form without completing this entire section:

Name of Institution	Location	Years Attended	Major	Degree	Date degree conferred

Professional and Ministerial Experience:

Position Name	Location	Job Description	From (specify year)	To (specify year)

Marketing Questions *please answer the following questions:*
1 How did you first learn about IRF?_____
2 If your Community, Provincial, or a former IRF member first told you about the program, how did they hear of IRF?
_____
3 In which newspaper(s) or magazines(s) have you seen IRF advertised? _____
4. Did you find and/or use the IRF website (www.ctu.edu/religiousformation.htm)? ☐ Yes ☐ No
5. Was the brochure useful in your decision to apply? ☐ Yes ☐ No