

Catholic Ministry Formation Register

Registration and Consent Form

The Catholic Ministry Formation Register (CMFR) is intended to keep a record of those in formation for Clerical or Religious Ministry. This will aid in the screening of applicants and serve as a historical record of formation.

By signing this form you are consenting to:

1. Your details below being recorded on the CMFR, and
2. ACSL seeking and recording basic updates on the course of your formation (such as predominate location, status, and screening/formation events) from your Church Entity.

These details will be checked against CMFR records, should you have previously applied with another Church entity, the fact that you have applied elsewhere, along with the name of the relevant Church entity, will be disclosed to the referring Contact Person.

The CMFR is administered by Australian Catholic Safeguarding Ltd (ACSL). The information on the CMFR will be managed in accordance with ACSL's privacy policy and all relevant laws, including the Privacy Act 1988 (Privacy Act). Please see our privacy statement on the next page for further details.

Registrant's Personal Details

1. Full Name (legal – as appears on your Birth Certificate or Passport):
2. Have you ever been known by another name? If so please list any previous or alternative names (including religious names):
3. Date of Birth:
4. Place of Birth:

Registrant's Consent

I consent to the entry of the details that I have provided here, which are correct and complete, onto the CMFR. I understand that these will be used and added to in the manner and for the purpose detailed above.

Signature:

Date:

Formation details

1. Forming Church entity (i.e. Religious order, Diocese)
2. Current place of formation (i.e. Seminary, novice house)
3. Date of commencement

Past screening events

WWCC confirmed

Police check

Medical examination

Enquiry into impediments

Past formation events

Temporary Vows

Permanent Vows

Ordination to the Diaconate

Ordination to the Priesthood

Psych. Evaluation(s)

Initial

Mid-formation

Final

CMFR Contact Person's Affirmation

Contact Person's name:

I submit the information contained here, supplied to me by the applicant in my role as Contact Person for entry on the CMFR. I have ensured that the applicant is aware of the Register and how their information will be used and have witnessed them sign the consent above. I have confirmed, to the best of my ability, that the details provided here by the applicant are correct to.

Signature:

Date:

Privacy Statement

Your information will be kept securely and only accessed by ACSL staff for the purposes of managing it. This storage and handling will occur in accordance with ACSL's [privacy policy](#) and all relevant laws. Disclosure, modification or additions to your information will occur as set out in the CMFR policy.

Information about your application and formation will primarily be disclosed if we receive another Notice of Application in your name, on written request from a suitably authorised vocations director, or otherwise in accordance with ACSL's [privacy policy](#).