

**TRIBUNAL  
DIOCESE OF ROCHESTER**

**REQUEST FOR A DECLARATION  
ON LACK OF CANONICAL FORM**

This form is to be completed with the assistance of a pastoral minister who is knowledgeable about Church law concerning the valid celebration of marriage, including convalidation and sanation of previously invalid marriages.

**ALL ITEMS MUST BE ANSWERED.**

*(Please print or type)*

Name _____
Date received _____
Case number _____
For office use only

**A. PETITIONER** Daytime Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Maiden \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Father's name \_\_\_\_\_

Mother's name (first and maiden) \_\_\_\_\_

For Catholic party

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

Church \_\_\_\_\_

Place \_\_\_\_\_

**B. RESPONDENT** Daytime Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Maiden \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Father's name \_\_\_\_\_

Mother's name (first and maiden) \_\_\_\_\_

For Catholic party

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

Church \_\_\_\_\_

Place \_\_\_\_\_

**ALL ITEMS MUST BE ANSWERED.**

**C. Date of Marriage** \_\_\_\_\_

**Who officiated at the ceremony?** \_\_\_\_\_  
(name and title, occupation/office)

**Place of Marriage** \_\_\_\_\_  
(e.g. non-Catholic church, office, private home, etc.)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

**D. Was this the first marriage for both of you?** Yes \_\_\_ No \_\_\_  
If not, please give details.

\_\_\_\_\_  
\_\_\_\_\_

**E. Was a dispensation from canonical form granted for this marriage?** Yes \_\_\_ No \_\_\_  
If yes, when and where?

**F. Was this marriage ever convalidated by a renewal of consent in the presence of a priest/deacon and two witnesses?** Yes \_\_\_ No \_\_\_  
If yes, when and where?

**G. Was a sanatio in radice obtained for this marriage?** Yes \_\_\_ No \_\_\_  
If yes, when and where?

**H. How many children were born of this union?** \_\_\_\_\_

Who has custody of them? \_\_\_\_\_

Are support obligations being honored? \_\_\_\_\_

**I. Date of Divorce or civil annulment** \_\_\_\_\_

City, County and State where obtained \_\_\_\_\_

**J. Please list all other marriages you have contracted** by including the maiden name of your former spouse, the date of the marriage and, if applicable, the date of the divorce.

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date of Marriage)

\_\_\_\_\_  
(Date of Marriage)

\_\_\_\_\_  
(Date of Divorce)

\_\_\_\_\_  
(Date of Divorce)

(List any other marriages on an additional sheet)

**ALL ITEMS MUST BE ANSWERED.**

**K. Marriages which took place before January 1, 1949:**

Was the Catholic party raised as a Catholic? **Yes** \_\_\_ **No** \_\_\_  
A Certificate of First Holy Communion, Confirmation or record of attendance in a CCD program is needed.

**L. Marriages which took place between November 27, 1983, and October 26, 2009:**

Did the Catholic party ever leave the Catholic Church by a formal act (E.g. join another church, renounce Catholic affiliation)? **Yes** \_\_\_ **No** \_\_\_  
**If yes, give details.**

---

---

**M. Whom do you wish to marry in the Roman Catholic Church?**

Name \_\_\_\_\_

Address \_\_\_\_\_

City and State \_\_\_\_\_

Religion \_\_\_\_\_

**Was this person previously married?** **Yes** \_\_\_ **No** \_\_\_

**If yes, has this person received a Decree of Nullity?** **Yes** \_\_\_ **No** \_\_\_

**Note to Pastoral Minister:**

*If the person whom the petitioner wishes to marry has been previously married in any civil or religious ceremony, please submit a separate form appropriate to the circumstances of that marriage, unless that person's freedom to marry has already been determined.*

I hereby declare that all the information I have given is the truth, the whole truth, and nothing but the truth, so help me God.

\_\_\_\_\_  
Signature of Petitioner

Sworn in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(Church, city, state, ZIP Code)

\_\_\_\_\_  
Pastoral Minister (Please print name)

\_\_\_\_\_  
Signature of Pastoral Minister

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP Code

\_\_\_\_\_  
Phone Number including Area Code

**Continued on next page**

**The following materials must be submitted with this request for the Declaration:**

1. a newly issued baptismal certificate (with raised seal) for the Catholic party, *dated within the last six months, including any marriage notations.*
2. a civil or Church record of marriage which **includes the name and title of the person who officiated at the ceremony.** In New York, a **Department of Health Affidavit, License, and Certificate of Marriage** should suffice. **Any document lacking the name and title of the person who officiated is insufficient.**

Please send original document, not a copy.

*Please Do Not send photocopies of numbers 1 and 2 above. Documents should have raised seal of the issuing office. These documents will be returned to the Pastoral Minister at the completion of your case.*

3. **Complete** final Judgment of Divorce or Decree of Civil Annulment.

- **Please make a copy of this form for your records.**
- **Incomplete forms and those without the proper documents will be returned to the petitioner.**
  
- **Send this original, signed form (along with the documents indicated) to:**

TRIBUNAL  
DIOCESE OF ROCHESTER  
1150 Buffalo Road  
Rochester, New York 14624-1890

**Documents will be returned to the Pastoral Minister submitting them so that they may be included with the pre-marital investigation. The Decree will be sent to the petitioner.**

Questions may be directed to the Tribunal office at  
585-328-3228, extension 1223.