

Financial Inquiry Form

Form 4 Last updated 7/2013

For Those Discerning a Call to Holy Orders in the Diocese

Name:			
Spouse/Partner's Name (if applicable):			
Home Address:	City	St Zip:	
Home Phone: ()		Work Phone: ()	
E-mail:@	·		
<u>Assets</u>		Liabilities	
Cash		Credit Cards	
CD's		Car Loans	
[RAs	_	Home Mortgage	
Pension Plan (401k, etc.)	_	Rental Property Debt	
Real Estate – House	_	Other Debts	
Real Estate – Rental Property	<u> </u>	Student Loans	
Real Estate – Other			
Automobile(s)	_	You may indicate later changes, as of a	anticipated seminary
Other (please describe)	_	date, to figures in either column.	
Total Assets	_	Total Liabilities	
Budget (12 mg	onths, beginning S	eptember 1st)	
Estimated Resources		Es	stimated Expenses
		Tuition	
		Books/Supplies	
		Seminary Board	
		Other Food Expenses	
		Room / Rent	
		Utilities / Phone	
Amount from Capital		Clothing / Laundry	
Available Savings		Recreation	
Expected help – Parents		Pledge Contributions Health Insurance	
Expected help – Diocese		Other Medical / Dental	
Expected help – Parish Other (please describe)		Life Insurance	
Other (please describe)		Travel Expenses	
		Car Payment	
		License / Insurance	
	<u></u> .	Other Debts	
	<u></u> .	Childcare	
 Total		Other Expenses	
Additional Needed		Total	