

## 63A Chartwell Drive, Singapore 558758, Tel 6280 6076

APPLICANT									
Name in NRIC: Underline Surname						Male/Female			
Date of birt	Date of birth:		Current Age:						
Country of	birth:			·					
Address:									
Contact No	Contact No.: Hom		Mobile:						
Email:									
Education	Level:		Profession:						
RELIGION									
Religion I currently p	Religion I currently profess If Christian, state							Do attach a	
Baptized before?	Yes / No	Name of Church:				recent photograph			
		Date:							
MARITAL ST	ATUS (F	Please (	check ( 🖊 ) the appropri	ate bo	ox)				
Single	(		Married			vorced		Widowed	
IF MARRIED									
Is this your first marriage?					Yes / No				
Does your	spouse	have	a previous marriage	?	Yes / No				
Is your spo	use Cat	tholic?	)	`	Yes / No				
Married at Others:	Registry	of Ma	arriages(ROM)/ Catl	holic	Chur	ch/ Overse	eas/		
Date of Ma	rriage:		ROM Cert No.:			ert No.:			
IF REMARRI	ED/ DIVO	RCED	)						
			egistry of Marriages(	(ROM	1)/ Ca	tholic Chu	rch/ (	Overseas/	
Is your ex-spouse Catholic?					Yes / No				
Is it a civil divorce?					Yes / No				
Is it annulled?					Yes / No				

## **IMPORTANT PDPA NOTICE:**

The Church of St Francis Xavier ("the Church") safeguards all personal data collected through any ministry, parish, commission, or activity, in accordance with the Singapore Personal Data Protection Act 2012 ("PDPA").

In compliance with the PDPA and by signing this form, I agree and consent to the collection, receipt, processing, disclosure, storage and use of all my personal data and all such data submitted to the Church for the purpose of processing and administration of the abovementioned.

I certify the above information is true to the best of my knowledge and acknowledge and agree to abide with the guidelines and PDPA notice.

Name and Signature		Date
FOR ADMINISTRATOR USE ONLY		
RCIA Batch:	Other Remarks:	