

*"I remind you to rekindle the gift of faith that is within you" (2 Tim 1:6)*



**THE PONTIFICAL NORTH AMERICAN COLLEGE**  
APPLICATION for SPRING SESSIONS  
Institute for Continuing Theological Education  
00120 Vatican City State, Europe

**Spring Session: January 20 - April 14, 2025**

Pilgrimage (March 6 -14) I wish to attend the optional Pilgrimage (yes or no) \_\_\_\_\_

NAME .....  
(Last) (First) (Middle)

ADDRESS .....

CITY ..... STATE ..... ZIP ..... COUNTRY .....

PHONE: ..... CELL: ..... FAX: .....

E-MAIL: .....(please print)

BIRTH: .....  
(Month) (Date) (Year)

PLACE OF BIRTH: .....  
(City) (State / Province) (Country)

NAME OF DIOCESE / RELIGIOUS COMMUNITY: .....

PRESENT ASSIGNMENT:.....

SEMINARY ATTENDED: .....

DATE OF ORDINATION OT THE PRIESTHOOD: .....  
(Month) (Date) (Year)

CITIZENSHIP .....

## PERSONAL INFORMATION QUESTIONNAIRE

To assist the Institute for Continuing Theological Education (ICTE) in determining the fitness of its program to serve your needs, please answer the remaining questions of this application as completely as you can.

LAST NAME .....First Name .....Initial .....

1. Please list your assignments and experiences in the priesthood.  
(Please be specific: name of parish / Institution, title, city, dates, etc.).

2. Please prepare a statement, which is a personal self-description.  
- How do you see yourself? What are your personality characteristics? Are you considered a self-starter? Are you active in group settings?

3. What personal benefit do you expect from the Spring Sabbatical?

4. Besides personal enrichment, how do you foresee that the ICTE would be able to fulfill your **ministerial needs** at this point in life?





**Physician's Information**

<i>Name (please print)</i>		<i>Telephone</i>	
<i>Address</i>			
<i>City</i>	<i>State/Province</i>	<i>Country</i>	<i>Zip/Post Code</i>

<p><b>NOTE:</b></p> <p><i>The reception of this application form by the Pontifical North American College does NOT constitute acceptance.</i></p> <p>The ICTE Admissions Committee, through the Director of the Institute, grants acceptance into the Institute program.</p> <p>Such acceptance / non-acceptance is communicated shortly after all documentation is received in Rome. (within the year of acceptance)</p>	<p><b>P H O T O</b></p>	<p><b>PLEASE UPLOAD PASSPORT-SIZE PHOTOGRAPH</b></p> <p>OF THE PARTICIPANT DRESSED IN CLERICS QUALITY: AT LEAST 300 DPI</p> <p><i>This photo will be added to the photo list included in the program's orientation kit. It helps participants to recognize one another.</i></p>
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Your Signature:

*(Please scan your signature and upload it here as an image.)*

Today's date: .....

Please send this form and a digital passport size photo via e-mail to [romeshabat@pnac.org](mailto:romeshabat@pnac.org)