

Archdiocese of Saint Paul and Minneapolis

2009 Survey of Religious Communities

Title Br Mother Rev Rt Rev Very Rev Sr Dr Mr

First Name

Last Name

Initials E.g. OSB, OSF, SSND, etc.

Home Addr1
(Location Name)

Home Addr2
(Street Address)

**Type "X" in the
correct box below:**

single residence

Home City

Home State

OR

multi-residence

Home Zip

Home Phone

Work Addr1
(Location Name)

Work Addr2
(Street Address)

Work City

Work State

Work Zip

Work Phone

Preferred EMail

Ministry

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Contemplative | <input type="checkbox"/> Parish Ministry | <input type="checkbox"/> Volunteer |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Prayer & Witness | <input type="checkbox"/> Other |
| <input type="checkbox"/> Education | <input type="checkbox"/> Retired | |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Retreat Work | |
| <input type="checkbox"/> Leadership (Community) | <input type="checkbox"/> Subsidiary Services | |

**Click in all boxes
that apply**

Job Title

Archdiocese of Saint Paul and Minneapolis

2009 Survey of Religious Communities

Type "X" in one of these
boxes if you are a:

Major Superior

Local/Regional Superior

Religious Community

Celebrating Jubilee in 2010 (Y or N)

Yes No

If Yes, Date of Jubilee (month, day & year)

E.g. mm/dd/yyyy

Jubilee#