

**SPIRITUAL AND PASTORAL REPORT**  
**Ecumenical Apostolic Church Diocese**

**Instructions:**

1. Please complete a separate report for each parish or separate chaplaincy committed to your pastoral care. Include information regarding subordinate chapels (“missions”) within the total parochial information. Chaplains should complete as many items as are pertinent.
2. Sacramental statistics reported should reflect the entire calendar year (from January 1 through December 31) just completed.
3. Educational statistics (e.g., *re* schools, religious education programs, seminarians, etc.) reported should reflect the situation as of the beginning (usually August or September) of the academic year in the “fall semester” just completed.
4. Statistics regarding other personnel and schedules should reflect the situation at the end of the calendar year (December 31) just completed.
5. Please **type or print legibly**, and complete all items. Make a copy of this report for the parish files. Staple these pages together in the upper left corner. Send this report to the ***Ecumenical Apostolic Church Diocese office, P. O. Box 236 Barhamsville, VA. 23011 ( All tithing support checks payable to Good Hope Church )***

**Report for the Calendar Year (January 1 through December 31)**

Name of parish or chaplaincy\_\_\_\_\_

City or town\_\_\_\_\_

Subordinate chapel(s) [mission(s)], if any\_\_\_\_\_

City or town\_\_\_\_\_

Pastor, administrator, or chaplain\_\_\_\_\_

Associate Pastor(s), if any\_\_\_\_\_

Mailing address of parish office\_\_\_\_\_

City/Zip\_\_\_\_\_

Street address of office, if different\_\_\_\_\_

City/Zip\_\_\_\_\_

Street Address of rectory, if separate\_\_\_\_\_

City/Zip\_\_\_\_\_

*This form is due in the Chancery by the 15<sup>th</sup> of each month*

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The maximum seating capacity of the principal worship space (usually the church)\_\_\_\_\_

Number of families (households or individuals living alone) in the parish \_\_\_\_\_

Total population of the parish (individuals)\_\_\_\_\_

**I. Statistics** for the entire year ending December 31:

Number of Baptisms:\_\_\_\_\_

Infants (up to 7) \_\_\_\_\_ Adults (7 and over) \_\_\_\_\_ Received into Full Communion \_\_\_\_\_  
 Of the total number of Baptisms, how many of the baptized were *not* parishioners? \_\_\_\_\_  
 Number of Confirmations (include all children and adults in the total) \_\_\_\_\_  
 Number of First Eucharist recipients (include all children and adults in the total) \_\_\_\_\_  
 Number of Marriages (including convalidations and sanations): \_\_\_\_\_  
 Catholic/ Mixed /Religion/ Disparity of Cult \_\_\_\_\_  
 (*Non-Catholic is (Both parties Catholic) baptized (Non-Catholic not baptized)*) \_\_\_\_\_  
 Of the total number of marriages, in how many of them were *neither* the bride *nor* the groom parishioners? \_\_\_\_\_  
 Number of Funerals: \_\_\_\_\_ With service in church \_\_\_\_\_ Without service in church \_\_\_\_\_  
 Of the total number of funerals, in how many was the deceased a *non*-parishioner? \_\_\_\_\_  
 Number of recipients of the anointing of the sick administered by the priests residing in your parish \_\_\_\_\_  
 Within Mass Outside of Mass \_\_\_\_\_  
 What percentage of your parish membership is? Caucasian \_\_\_\_\_ African-American \_\_\_\_\_  
 Hispanic \_\_\_\_\_ Vietnamese \_\_\_\_\_ Native American \_\_\_\_\_ Other \_\_\_\_\_  
 (ie: *significant immigrant population* -please specify and give percentage) \_\_\_\_\_

**II. Schedules** (as of December 31):

The Sunday Mass schedule (beginning with the anticipated Mass on Saturday), [indicate which Mass(es) are celebrated regularly both in the principal worship space and elsewhere]: \_\_\_\_\_

What is the average Sunday Mass attendance in your parish? \_\_\_\_\_

The weekday Mass schedule (including Saturday Masses which do not anticipate the Sunday observance, if any, and reoccurring biweekly or monthly Masses), [indicate the Mass(es) which are celebrated regularly both in the principal worship space and elsewhere] (*There is no longer any need to report schedules for holy days of obligation*):

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Is communion under both kinds normally offered at the principal weekend Masses?

YES / NO (circle one)

List the scheduled days and times each week when at least one priest is available in the church or reconciliation area to hear individual confessions:

\_\_\_\_\_

\_\_\_\_\_

Are communal penance services (which include integral individual confession and absolution) regularly scheduled: \_\_\_\_\_

During Advent and Lent? \_\_\_\_\_

For students in Catholic schools and in catechetical programs?

**III. Education:**

Number of male children from the parish attending: \_\_\_\_\_

Any elementary school (pre-K-8)? \_\_\_\_\_ Any high school (9-12)? \_\_\_\_\_

Parish elementary school of religion? \_\_\_\_\_ Parish high school of religion? \_\_\_\_\_

Number of female children from the parish attending: \_\_\_\_\_

Any elementary school (pre-K-8)? \_\_\_\_\_ Any high school (9-12)? \_\_\_\_\_

Parish elementary school of religion? \_\_\_\_\_ Parish high school of religion? \_\_\_\_\_

Does the parish operate a *pre-school and/or day care* school? If yes, number of:

male students female students employees volunteers \_\_\_\_\_  
Does the parish operate a *parochial* elementary school (pre-K-6 or pre-K-8)? If yes,  
number of: \_\_\_\_\_  
male students female students employees volunteers teachers belonging to a religious  
community Name of religious community \_\_\_\_\_  
Does the parish belong to an *interparochial* school system? If yes, name of  
Interparochial elementary school \_\_\_\_\_  
Interparochial high school \_\_\_\_\_  
Is the parish officially in the “region” of a *diocesan regional* high school? If yes,  
its name \_\_\_\_\_

**IV. Other information:**

Number of cemeteries owned by the parish \_\_\_\_\_  
Number of nursing homes without any other chaplains within the parish boundaries \_\_\_\_\_  
**Spiritual and Pastoral Report Page 4**  
Are pastoral visits and communion calls scheduled regularly at these? \_\_\_\_\_  
Number of hospitals without any other chaplains within the parish boundaries \_\_\_\_\_  
Are pastoral visits and communion calls scheduled regularly at these? \_\_\_\_\_  
Total number of active men and women religious residing in the parish \_\_\_\_\_  
Is there an active Parish Pastoral Council? If yes, frequency of meetings. \_\_\_\_\_  
Lay chairperson \_\_\_\_\_  
Personal mailing address \_\_\_\_\_  
Personal telephone number (     ) \_\_\_\_\_  
Is there an active Parish Finance Council? If yes, frequency of meetings \_\_\_\_\_  
Lay chairperson \_\_\_\_\_  
Personal mailing address \_\_\_\_\_  
Personal telephone number (     ) \_\_\_\_\_  
Name of person responsible for marriage ministries \_\_\_\_\_  
Personal mailing address \_\_\_\_\_  
Personal telephone number (     ) \_\_\_\_\_  
Is there an active Respect Life ministry? If yes,  
Coordinator \_\_\_\_\_  
Personal mailing address \_\_\_\_\_  
Personal telephone number (     ) \_\_\_\_\_  
Is there an active Social Responsibility ministry? If yes,  
Coordinator \_\_\_\_\_  
Personal mailing address \_\_\_\_\_  
Personal telephone number (     ) \_\_\_\_\_  
Is there an active Youth Ministry? If yes,

Coordinator \_\_\_\_\_

Status: Full-time Paid Part-time Paid Volunteer \_\_\_\_\_

Personal mailing address \_\_\_\_\_

Personal telephone number ( ) \_\_\_\_\_

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Parochial organizations or groups which are active in the parish at the present time (e.g., Altar Society, Ushers' Society, choirs, etc.): \_\_\_\_\_

**V. Employees:**

Not counting employees of the parochial school, the number of other **paid** employees:

Permanent deacon(s) assigned to the parish by the bishop \_\_\_\_\_

Lay *professional* staff (catechetics, liturgy, etc.) \_\_\_\_\_

Full-time (35 hours/week) Part-time (20 hrs. or less) \_\_\_\_\_

Lay *office support* staff (secretaries, receptionists, key entry operators, etc.): \_\_\_\_\_

Full-time (35 hours/week) Part-time (20 hrs. or less) \_\_\_\_\_

Lay *maintenance* staff (janitorial, housekeeping, etc.) \_\_\_\_\_

Full-time (35 hours/week) Part-time (20 hrs. or less) \_\_\_\_\_

All other paid employees:

Full-time (35 hours/week) Part-time (20 hrs. or less) \_\_\_\_\_

**Adult Paid Employees** who have contact with children and youth as part of their job: \_\_\_\_\_

Number of paid employees who have contact with children and youth \_\_\_\_\_

Number of these **Adult Volunteers** taking part in programs related to children and youth catechesis: \_\_\_\_\_

Number of volunteers who have contact with children and youth \_\_\_\_\_

**Attestation:**

To the best of my knowledge and to the best of my abilities, I do attest that all pertinent universal and diocesan norms, and civil laws, are followed in the administration and pastoral care of the community entrusted to my care. I furthermore hereby certify that the above information is true and correct.

\_\_\_\_\_  
Signature Date of Pastor, Priest Administrator, or Priest Chaplain