



Application for Priests to Engage with CFCP

Legal Disclaimer: Information submitted to CFCP will be treated confidentially and only disclosed to personnel who have a need to know such information for the purpose of evaluating an application. Any information to be shared publicly will be done following written consent by CFCP and the Priest. CFCP's support is voluntary and subject to change at the organization's discretion.

Enter Your Contact Information

Title:

First Name:

Last Name:

Address:

Phone:

Email:

Describe Your Situation & Needs

Date of Ordination:

Place of Ordination:

Why the Bishop / superior canceled (or seeks to cancel) you:

Status of your case with the chancery / order:

Current personal situation and challenges underpinning your proposal to collaborate with CFCP:

Proposed Collaboration with, or Support Requested from, CFCP

Select one or more of the following types of support and briefly describe what is needed.

Spiritual

Prayers - Mass intentions; rosary intentions; fasting intentions; public prayer rallies at a requested location (e.g. Chancery, Parish).

Guidance - Discernment with a Spiritual Advisor

Temporal

Housing - Temporary living quarters; rental assistance; essential repairs (including medically necessitated alterations)

Transportation - Moving to a new location, transit to critical upcoming meetings (e.g. for a hearing, appointment), regular journeys to a needed location, essential repairs to a vehicle

Medical - Assistance paying physical or mental health bills

Legal - Assistance paying for legal advisement by a Canon and/or Civil Lawyer

Outreach - Opportunities to raise awareness through CFCP-facilitated speaking engagements, letter writing campaigns, website postings, social media, etc.

Other - Additional requests will be considered on a case-by-case basis

Explain the specific collaboration or support that you propose, the timeframe, whether it is one time or recurring, anticipated value or cost, and / or other pertinent information.

References

References will only be contacted by CFCP's Priestly Assistance Coordinator following initial due diligence evaluation and receiving your approval to proceed with contacting them.

Lay faithful Catholic #1:

Name, phone, email, relationship to the applicant (cannot be a family member) and familiarity with the situation

Lay faithful Catholic #2:

Name, phone, email, relationship to the applicant (cannot be a family member) and familiarity with the situation

Catholic Priest #1:

Name, Diocese or Order, phone, email, and familiarity with the situation

Catholic Priest #2:

Name, Diocese or Order, phone, email, and familiarity with the situation

Certification

I self-certify that I meet the CFCP Eligibility Criteria.

Review in full the Criteria at <https://canceledpriests.org/priestlysupport>

I self-certify that I agree to all aspects of the CFCP Affirmation of Faith and that all of the contents of this application are accurate to the best of my knowledge.

Review in full the Affirmation of Faith located at <https://canceledpriests.org/priestlysupport>

Signature

Date

Submit the completed and signed application to CFCP's Priestly Assistance Coordinator via email at: fatherduvall@canceledpriests.org (preferred), or via mail at: PO Box 208 Flossmoor, IL 60422. You will receive an update via email or phone when the initial due diligence evaluation is complete.