

**PRE-APPLICATION PROCESS:** We ask that those interested in co-membership attend events, retreats, workshops, etc. offered to the public by Loretto and Loretto Link in order to learn more about the Community and to get to know Loretto members. In addition, the names of four (4) Loretto members whom the applicant to co-membership knows and who can provide a reference for the applicant will be requested. Please complete this pre-application process before submitting this form.

## LORETTO COMMUNITY

### PRELIMINARY INFORMATION FORM FOR APPLICATION TO THE CO-MEMBERSHIP PROCESS

DATE:	LEGAL NAME:		
NICKNAME:	OTHER LEGAL NAMES:		
PHONE (H):	(C)	(W)	
HOME STREET ADDRESS:			
HOME CITY:	STATE	ZIP	
WORK INFORMATION – ORGANIZATION NAME:			
WORK ADDRESS:			
WORK EMAIL:			
PERSONAL EMAIL:			
SOCIAL MEDIA:			
DATE AND PLACE OF BIRTH:			
RELIGIOUS AFFILIATION:			
HOW DO YOU PRACTICE YOUR SPIRITUALITY/FAITH?			
MARITAL STATUS:	PERSONAL PRONOUN PREFERENCE (e.g., she/her; we/they):		
EDUCATION COMPLETED:			
CURRENT WORK/VOLUNTEER ACTIVITIES:			
HOW DID YOU LEARN ABOUT LORETTO, AND WHY ARE YOU INTERESTED IN CO-MEMBERSHIP?			

WHAT MIGHT YOU BRING TO CO-MEMBERSHIP AND THE LORETTO COMMUNITY?

WHAT WOULD YOU BE ABLE TO DO IN CO-MEMBERSHIP THAT YOU AREN'T ABLE TO DO NOW?

WHAT DO YOU LIKE ABOUT YOUR LIFE? WHAT, IF ANYTHING, WOULD YOU WANT TO CHANGE?

HOW MIGHT BEING A PART OF LORETTO AS A CO-MEMBER CHANGE YOUR LIFE?

WHAT ARE TEN VALUES/QUALITIES THAT ARE MOST IMPORTANT TO YOU?

WHAT WOULD BE YOUR EXPECTATIONS OF CO-MEMBERSHIP?

PLEASE LIST THE NAMES OF FOUR [4] LORETTO MEMBERS WHO CAN PROVIDE RECOMMENDATIONS FOR YOU TO ENTER THE CO-MEMBERSHIP PROCESS. WHEN DID YOU MEET THEM, AND HOW WELL DO YOU KNOW THEM?

WHO ARE OTHER LORETTO MEMBERS THAT YOU KNOW, IF ANY? WHEN DID YOU MEET THEM, AND HOW WELL DO YOU KNOW THEM?

LIST LORETTO MEDIA PUBLICATIONS THAT YOU ARE CURRENTLY RECEIVING, INCLUDING ON-LINE WEEKLY MESSAGES

LIST LORETTO EVENTS, WORKSHOPS OR RETREATS THAT YOU HAVE ATTENDED (ON-LINE OR IN-PERSON) AND THE DATES ATTENDED:

**NOTE THAT WE WILL CONDUCT A CRIMINAL BACKGROUND CHECK** TO PROVIDE PROTECTION BOTH FOR OUR COMMUNITY AND FOR YOU. THE RESULTS WILL BE KEPT CONFIDENTIAL AND SHARED WITH THE CO-MEMBERSHIP TEAM DISCERNING YOUR ADVISABILITY TO ENTER THE CO-MEMBERSHIP PROCESS. HAVING A CRIMINAL RECORD **DOES NOT** NECESSARILY PRECLUDE YOUR ENTERING THE CO-MEMBERSHIP PROCESS; FACTORS SUCH AS THE NATURE OF THE CHARGES AND THE TIME LAPSED SINCE THE CHARGES WILL BE CONSIDERED.

**PLEASE INITIAL HERE TO INDICATE YOU HAVE READ THIS NOTICE:** \_\_\_\_

SIGNATURE (typed or written)

DATE:

---

*PLEASE SUBMIT COMPLETED FORM VIA EMAIL TO THE CO-MEMBERSHIP GROUP AT  
COMEMBERSHIP@LORETTOCOMMUNITY.ORG. RESPONSES MAY TAKE SEVERAL DAYS.*