



PARISH VISITATION REPORT

Annual Visit of the Vicar Forane to a Parish in the Deanery

Diocese of Erie

DEANERY:	PARISH:
DEAN:	DATE:

1. Pastor: _____

Date of last retreat: _____ Date of last physical: _____

Location of Will: _____ of Living Will: _____

Person to contact in case of emergency: _____

Phone Number (home): _____ (cell): _____

2. Parochial Vicar/Resident: _____

Date of last retreat: _____ Date of last physical: _____

Location of Will: _____ of Living Will: _____

Person to contact in case of emergency: _____

Phone Number (home): _____ (cell): _____

**NOTE: If there are additional priests living in residence, please provide information from questions #1 and #2 on a separate sheet.*

3. Do you have regular staff meetings? _____

4. Is there a Finance Council? _____ Frequency of meetings: _____

Parish Council? _____ Frequency of meetings: _____

Are minutes kept for both Councils? _____

5. Frequency of visitation of the sick

Hospital: _____ Home Visitations: _____

Nursing Homes: _____

6. Are parish records computerized? _____

If not, are they kept in a safe, fire-proof place? _____

7. Give the date of the last entry of the following Registers:

a) Baptismal: _____	d) First Eucharist: _____
b) Confirmation: _____	e) Matrimony: _____
(Anointing of the Sick)	
Sick Call (if register is used): _____	f) Death: _____

8.	When was the last parish census completed? _____
	How was this done? _____
9.	How are Mass stipends recorded?
10.	Number of Mass intentions on hand: _____
	Balance in Mass account: _____
11.	Parish cemetery: Are records complete and current? _____
	Are there any significant problems or needs? _____
12.	Parish Properties – Are there any major needs/problems with the physical plant, including the church, school, parish center, etc.?
13.	What is the condition of liturgical items: vestments, vessels, tabernacle and repository for oils, etc.?
14.	What is the condition of the rectory?
15.	Are any repairs or renovations needed in the rectory?
16.	Is anyone else, other than clergy assigned by the Bishop, living in parish buildings? Have they received permission from the Bishop?
17.	Are there any pastoral needs within the parish boundaries which are not being met, and/or particularly challenging?
18.	Are any clerics in the area in need of special attention or assistance?
19.	Do the clerics in the area support and assist one another?

Pastors's Signature: _____ Date: _____

Dean's Signature: _____ Date: _____

The Dean is to retain the original completed form. Please forward a copy to the Chancery Office.