

DIOCESE OF PENANG

FIRST INSTANCE ECCLESIASTICAL TRIBUNAL

Pusat Keuskupan Katolik, 290 Jalan Macalister, 10450 George Town, Pulau Pinang

Tel: +6012-6692434 Email: tribunal@pngdiocese.org

Petition for a declaration of nullity due to

Lack of Canonical Form

For Office Use

Date Received :

Protocol No. :

The following documents **MUST** be submitted with this Petition:

- ☐ MyKad/Passport of Petitioner/Proposed Spouse
- ☐ Civil Marriage Certificate
- ☐ Baptismal Certificate for the Catholic Party (issued within the last 6 months)
- ☐ Decree Nisi of Petitioner/Proposed Spouse
- ☐ Decree Nisi Final & Absolute of Petitioner/Proposed Spouse
- ☐ Any other relevant documents

PETITIONER		RESPONDENT
	Name (per MyKad/Passport)	
	Current Address	
	Phone	
	Email	
	Date of Birth	
	Place of Birth	

PETITIONER	RESPONDENT
At the time of this marriage, had you been baptised or received into the Catholic Church? <input type="checkbox"/> Yes <input type="checkbox"/> No	At the time of this marriage, had he/she been baptised or received into the Catholic Church? <input type="checkbox"/> Yes <input type="checkbox"/> No
If NO, what religion were you?	If NO, what religion was he/she?
If YES, please attach the certificate of baptism	If YES, please attach the certificate of baptism
Were you brought up as a Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive your first Holy Communion? <input type="checkbox"/> Yes <input type="checkbox"/> No Were you confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Was he/she brought up as a Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No Did he/she receive his/her first Holy Communion? <input type="checkbox"/> Yes <input type="checkbox"/> No Was he/she confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No

MARRIAGE IN QUESTION

Date of Marriage : _____

Place of Marriage : _____

Non-Catholic Church / Jabatan Pendaftaran Negara (JPN) / Temple / Others

(delete whichever is not applicable)

Was a dispensation from Canonical Form granted for this marriage? ☐ Yes ☐ No

Was this marriage celebrated in an Orthodox Church? ☐ Yes ☐ No

Was this marriage ever convalidated in a Catholic Church? ☐ Yes ☐ No

Was the convalidation ever discussed or considered between you and your former spouse? ☐ Yes ☐ No

Has the Catholic Party left the Church by a formal act? ☐ Yes ☐ No

(for marriages that took place between 27 Nov 1983 and 8 April 2010)

If YES, indicate the date of this formal departure _____

How long did you live together before your final separation? _____

Date of final separation _____

Have you been civilly divorced? ☐ Yes ☐ No

Date of Decree Nisi Made Final & Absolute _____

Were there children born in this marriage? ☐ Yes ☐ No

If YES, provide details

	Name	Date and Place of Birth	Baptised in Catholic Church?	Date and Place of Baptism	In whose custody are they?
1			<input type="checkbox"/> Yes <input type="checkbox"/> No		
2			<input type="checkbox"/> Yes <input type="checkbox"/> No		
3			<input type="checkbox"/> Yes <input type="checkbox"/> No		
4			<input type="checkbox"/> Yes <input type="checkbox"/> No		

What provisions are being made for your former spouse and children?

INTENDED MARRIAGE

Please provide the following details concerning the person you now wish to marry:

Name (*per MyKad/Passport*) _____

Address _____

Telephone _____

Email _____

Date of Birth _____

Place of Birth _____

Marital Status _____

Religion _____

Is he/she currently enrolled in RCIA? ☐ Yes ☐ No

If YES, state the Parish _____

AFFIDAVIT & OATH TO TELL THE TRUTH

I, _____, hereby swear before the Almighty God that the statement which

I have provided is the truth, the whole truth and nothing but the truth.

I attest that the information in this application is correct and true to the best of my knowledge. I have never contracted nor attempted any other marriages in my life other than those indicated on this application.

Signature of Petitioner

Date

Signature of Parish Priest

Date

Name of Parish Priest : _____

Parish Stamp

Name of Parish : _____

Address : _____

Phone : _____

TESTIMONY OF WITNESS

I, _____ (MyKad/Passport _____) of
(address) _____, hereby
solemnly swear that I know that the marriage between (Petitioner) _____
and (Respondent) _____ was performed at a **(delete whichever is not applicable)**
Non-Catholic Church / Jabatan Pendaftaran Negara (JPN) / Temple / Others on (date) _____ in
(town, state, country) _____.

I know this because _____

Was this union subsequently celebrated in the Catholic Church? ☐ Yes ☐ No

I know this because _____

Signature of Witness

Date

Relationship with Petitioner/Respondent : _____

Parish Priest's Comments:

Signature of Parish Priest

Date

Name of Parish Priest : _____

Parish Stamp

Name of Parish : _____

Address : _____

Phone : _____