



***Missionaries of the Gospel of Life***  
***Lay Associate Inquirer Assessment Form***  
*in preparation for Profession of Promises*

This Form is intended to assess your progress of formation in preparation for the making of Promises as a Missionary of the Gospel of Life (Lay Associate of Priests for Life). Most of the information referred to on this form may be found at [www.MissionariesoftheGospeloflife.org](http://www.MissionariesoftheGospeloflife.org) .

Your completion of this form indicates your understanding of the key elements that you have been asked to review in preparation for making a request to proceed toward the profession of your Promises.

Please return this completed form as soon as possible, and make a copy of it for yourself. Forms need to be signed and mailed to, Missionaries of the Gospel of Life, PO Box 141172, Staten Island, NY 10314. Once your form is approved you will be notified and a letter of recommendation will be mailed to the priest you designated.

Your full name:

Your mailing address:

Your phone number:

Your email address:

**General Questions:**

1. Has it been ten months or more since you requested membership in the Missionaries of the Gospel of Life (Lay Associates of Priests for Life)? Y N

2. Are you a parishioner in good standing? Y N Your parish:

Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

3. Have you reviewed and worked on all the material at: [www.MissionariesoftheGospeloflife.org](http://www.MissionariesoftheGospeloflife.org) ? Y N

4. Who is the Founder of the Missionaries of the Gospel of Life? \_\_\_\_\_

5. Name the diocese in which the Association is canonically based?

6. Name the National Coordinator of the Lay Associates: \_\_\_\_\_

7. Name the Four Spiritual Disciplines of the Missionaries: \_\_\_\_\_; \_\_\_\_\_;  
\_\_\_\_\_ and \_\_\_\_\_.

**Prayer Discipline:**

8. Please name the two daily prayers that the Missionaries of the Gospel of Life pray each day:

\_\_\_\_\_ and \_\_\_\_\_.

Are you praying the daily prayers consistently? Y N

9. Are you participating in the First Friday of the month Pro-Life Examination of Conscience? Y N

10. Have you reviewed and are you fulfilling the *Prayer Teaching* (as found on our website and manual)? Y N

11. Please indicate the name of the Priest's for Life *Prayer Booklet* that has been recommended for your purchase and use: \_\_\_\_\_.

12. Are you using some daily "prayer and bible reading companion" (i.e. *The Magnificat, Living with Christ*, other periodicals, or the breviary)? Y N

**Study Discipline:**

13. Have you reviewed and are you fulfilling the *Study Teaching* (as found on our website and manual)? Y N

14. Have you read *Evangelium Vitae* and completed the *Study Guide*? Y N

15. Are you knowledgeable about the Missionaries of the Gospel of Life: History, Founder, Aim, Promises, Four Disciplines, Spirituality and Virtues? Y N

16. Are the Missionaries a Religious Order or an Association of the Faithful? (circle one)

17. Have you been receiving, reviewing, and implementing the e-mail letters from Fr. Frank Pavone? Y N

18. Please name the six elements of our spirituality.

19. Please name the seven virtues that pertain to our spirituality.

20. Please summarize the aim of the Missionaries of the Gospel of Life.

21. What are the promises the Missionaries profess?

**Community Discipline:**

22. Have you reviewed and are you fulfilling the *Community Teaching* (as found on our website and manual)?  
Y N

23. Is your parish priest aware of your participation in the Missionaries of the Gospel of Life? Y N

24. Please indicate the priest who will write your letter of recommendation to be a member of the Association. This should be a priest of the parish in which you are active.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

25. Are you aware of the Life Cell Formats? Y N

26. Are you participating in or willing to participate in a Life Cell? Y N

27. Are you participating in regular meetings of another Pro-life group? Y N

**Apostolic Witness:**

28. Have you reviewed and are you fulfilling the *Apostolic Witness Teaching* (as found on our website and manual)? Y N

29. Are you participating in some form of Pro-life mission, ministry, or lifestyle (home, parish, community, nationally or internationally)? Y N

30. Are you willing, as possible, to participate in projects initiated by Priests for Life and the Missionaries of the Gospel of Life? Y N

31. Are you willing to promote Priests for Life and the Missionaries of the Gospel of Life? Y N

32. Following is the Priests for Life Statement on Non-Violence found at [www.priestsforlife.org/generalpfl/nonviolencepledge.htm](http://www.priestsforlife.org/generalpfl/nonviolencepledge.htm).

*From its inception, the Priests for Life Association, in union with the teaching of the Catholic Church, has unambiguously, publicly, and repeatedly rejected violence as a solution to the abortion problem.*

*Inflicting harm on persons or property is not an acceptable way of resolving this problem or proclaiming our message. The lives we are called to respect include the lives of those who disagree with us and oppose us.*

*No person who carries out, intends to carry out, or justifies in theory such acts of violence has any part in our organization or our efforts. We furthermore pledge to advance a climate of understanding and non-violence.*

Do you affirm the preceding Statement on Non-Violence?   Y     N

**Concluding affirmation**

I attest that my answers to these questions are accurate, and I desire to proceed forward with additional training and discernment to be a Missionary of the Gospel of Life (Lay Associate of Priests for Life), with the hope of eventually professing my promises in this Association.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Return to:  
Missionaries of the Gospel of Life  
PO Box 141172  
Staten Island, NY 10314  
Tel. 718-980-4400