

Date of Ordination: _____ Bishop who ordained you: _____

Place of Ordination: _____
(Church) (City) (State)

History of Parish Diaconal Assignments (list parish, city, state, dates):

Ministry Outside Parish-ministry and dates (diocese, hospital, nursing home, prison, etc.):

Non-ministry history of occupations and employment of note:

Military Service: Branch _____ Rank _____ Service Years _____

Special service of note: _____

Military Graveside Honors: ___ Yes ___ No
If yes, indicate what organization will render honors: _____

Significant Affiliations (organizations, groups, etc.):

Immediate Funeral Planning

Who should the diocese be in communication with in terms of clarifying arrangements?
(This may be the spouse, son/daughter, friend, etc. Note name and contact information.)

Name and Address of Funeral Home: _____

Have you pre-planned your funeral and other arrangements with them? ___ Yes ___ No

In which newspaper(s) do you intend to print your obituary? _____

Vestments and clothing for your body to be waked (note: it is tradition a deacon is buried
in their alb and a white stole): _____

Memorials are to be given to: _____

The Vigil Service

The place for the vigil service is: _____

The deacon, priest or other person who is to be the leader of the vigil service is:

Should the designated presider not be available, please list one alternate leader:

Do you have any special requests concerning the Vigil Service? (Special music, readers,
particular Scripture readings, story tellers, etc.)

The Funeral Liturgy

Church for Funeral Mass: _____
(Parish) (City) (State)

Place of the burial/internment: _____

Presider: If available, the Bishop or his designate normally will serve as presider.

Principal Concelebrant(s): _____

Deacon of the Mass:
(If you wish, there may be a Deacon of the Word and a Deacon of the Altar)

Deacon or Priest Homilist: _____

Alternate homilist if first choice not available: _____

Pallbearers (6-8): _____

Cantor: _____

Musician(s): _____

Readers (2): _____

Servers/Acolytes (5 needed for Bishop): _____

Person designated to speak on behalf of the family (optional):

Note any preferences you may have for music, readings, and symbols:

Music before Mass: _____

Entrance Hymn: _____

Placing of the Pall by: _____

Christian Symbol to be placed on casket (optional): _____

Choice of First Reading: _____

Choice of Responsorial Psalm: _____

Choice of Second Reading: _____

Gospel Acclamation: _____

Choice of Gospel: _____

Note any special petitions you would like included in the General Intercessions:

Presentation of the Gifts – list individuals who will bring gifts forward:

Presentation of gifts music: _____

Music Setting for Holy, Memorial Acclamation, Amen, and Lamb of God: _____

Communion Hymn: _____

Song of Farewell: _____

Recessional Hymn: _____

Committal Rite

Presider: _____

Any special instructions: _____

Deacon Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

If there is anything you wish to add or cover that was not included above, please indicate below.

Please make a copy of this form for you and your family and return the original form to: Office of the Diaconate, Diocese of Green Bay, PO Box 23825, Green Bay, WI 54305-3825.

Please be sure your family is aware of the location of your funeral plan and advise them the diocese has a copy of your plan.

Thank you.

