

MOUNT SAINT FRANCIS
7665 ASSISI HEIGHTS
COLORADO SPRINGS, CO 80919
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COMPANION RELATIONSHIP APPLICATION

Please print. Date _____

Name _____ Date of Birth _____

Address _____ Telephone _____

_____ Email _____

Religious Affiliation _____ Church _____

Occupation _____

Married ____ (Spouse's Name _____) Single ____ Widowed ____ Other ____

Dependents (Names and ages) _____

Please answer each of the following questions, and write on the back side if more space is needed.

1. How did you hear about the Companions of the Sisters of St. Francis?

2. Why do you want to become a Companion of the Sisters of St. Francis?

3. What level of relationship interests you? [Check only one level.]
 - **Level 1 – Companion in Prayer** _____
 - A person who bonds with the sisters through mutual daily prayer.
 - **Level 2 – Companion in Service** _____
 - A person who bonds with the sisters through mutual daily prayer, plus is able to share in community service both locally and provincially.

4. What are your hopes and expectations as a Companion?

5. Do you know a sister(s) or a companion(s) whom you would like as your Contact Person (Mentor)?
 - If yes, please name the person. _____
 - If no, a person will be invited to be your contact person.

If you choose to be a Companion in Service, there will be a time of preparation/study prior to making a Companion commitment.