Regional Fraternity of Eastern Canada

Revised: April 28, 2016

PRE - FRATERNAL VISIT AND ELECTION QUESTIONNAIRE						
1)	Our Fraternity Name					
2)	Name and address of our meeting place					
3)	The following check-off items are our fraternity nination (original please – no photocopies) a) Register of Minutes for Council Meeting . b) Register of Minutes for Fraternity Meetings . c) Financial Ledger	y records and will be present	ted to the Visitor for Comments			
4)	Name of the last Pastoral Visitor(s)Date					
5)	Frequency of Fraternity meetings When?					
6)	Frequency of Council Meetings					
7)	Other gatherings of our fraternity and their frequency					
8)	Fraternity Membership a) Number of Permanently Professed Members b) Number of Temporary Professed Members c) Usual number who regularly attend meetings					
9)	Number of persons presently in Formation:	Period of Inquiry				
		Period of Candidacy				
10)	The number of minutes during regular Fratern	ity meeting devoted to: a) Pr	ayer			
	b) on-going formation, c) Social	, d) business	e) other			
11)	Material used during: a) Initial Formation					
	b) On-Going Formation	on				

12)	Format of ongoir	ng formation used at our regular fratern	nity meetings			
13)		how Inquirers and Candidates are chec can Order prior to the next stage of forr		authentic vocat	ion to the	
14)	Name of our Spiritual Assistant					
15)	Role of our Spiritual Assistant at Council meetings					
16)	Role of our Spiritual Assistant at regular Fraternity meetings					
17)	The current Council was elected in Councilors may be elected for two consecutive terms of 3 years each. A third term requires a two-thirds majority on the first ballot. (See General Constitution Article # 79). Please check of the appropriate box beside the name of each of each officer.					
	OFFICE	NAME	1 St TERM	2 nd TERM	3 rd TERM	
Minister						
Vice-Minister						
Secretary						
Treasurer						
Formation Director						
Youth Contact (Appointed)						
JPIC Representative (Appointed)						

18)	Please outline the strengths of your Fraternity as you see them:		
4.0\			
19) Please outline the concerns or areas that need improvement:			
20)	Any other comments:		
 Date		Ministor's Signature	
Date	5	Minister's Signature	