



## THE ROME EXPERIENCE 2012 APPLICATION DEADLINES AND REQUIREMENTS

Applications for *The Rome Experience* 2012 program are due by:

**Priority Deadline:** Monday, January 16, 2012  
**Deadline:** Monday, February 13, 2012  
**Space Available Deadline:** Monday, March 12, 2012

All of the following must be included with the application:

1. A current color photograph of yourself in clerical clothing (passport quality)
2. A photocopy of your passport
3. Signature(s) of approval from your Vocation Director and/or Bishop, Page 4
4. Typewritten Biographical Essay (Minimum of 250 words), Page 5
5. Signed *The Rome Experience* Seminarian Code of Conduct, Page 6-7
6. Signed *The Rome Experience* Agreement, Page 8-9
7. Scholarship Application (if requesting financial assistance), Page 10-11

Send completed applications by mail, fax, or email to:

Mrs. Charmaine Roth  
Program Director  
**The Rome Experience**  
1420 Davey Road,  
Woodridge, IL 60517  
**Phone:** 630-739-9750 ext. 28 **Fax:** 630-739-9758  
**Email:** [croth@mwtf.org](mailto:croth@mwtf.org)

Acceptance into the program:

- Upon receipt of your application, you will be contacted and a convenient time arranged for a telephone interview.
- You will be notified of our decision regarding your application and scholarship request (if applicable) by Monday, February 20, 2012.



## THE ROME EXPERIENCE 2012 APPLICATION

### Personal Information:

*Last Name:	*First Name:	*Middle Name:
D.O.B.:	Place of Birth:	**Citizenship:
Passport number:	Date Passport was issued:	Date Passport expires:
Country that issued Passport:	Visa number, if applicable:	Social Security Number:

\*The NAME on your PASSPORT and the NAME on your AIRPLANE TICKET-- MUST BE THE SAME.

\*\*For non-American citizens, a Visa may be required for travel to Italy. It is the responsibility of the participant to obtain all required travel documents. This process can take several months. The Italian consulate should be contacted as soon as possible.

### Seminary Information:

Diocese for which I am studying:		Anticipated year of ordination:
Seminary Name:		Year in Seminary:
Seminary Address:		
City:	State:	Postal Code:
Email address:	Phone:	Mobile Phone:

### Home Information:

Home Address:		
City:	State:	Postal Code:
Email address:	Phone:	Mobile Phone:

**Emergency Contact Information:**

Emergency contact:		
Relationship:		
Address:		
City:	State:	Postal Code:
Home Phone:	Work Phone:	Mobile Phone:

**General Terms and Conditions**

By your signature, you acknowledge that Landa Cleary Travel Company, Inc. (LCTC) is acting as the travel agent between you and the suppliers of goods and services, which are not directly supplied by LCTC, such as air transportation, hotel accommodations, ground transportation, tours, tour guides, escorts, etc., and LCTC shall not be responsible for actions or omissions on the part of such suppliers, which may result in any loss, damage, delay, or injury to you. LCTC and Midwest Theological Foundation (MTF) shall not be responsible for injuries, damages, or losses caused to you in connection with social or labor unrest, mechanical or construction difficulties, diseases, local laws, climatic conditions, war, terrorist activities, or any other actions, omissions, or conditions outside their control.

By embarking upon travel, you voluntarily assume all risks and are advised to obtain appropriate insurance coverage against them. Your booking shall constitute a consent to the above and engaging the company acknowledges these conditions and agrees to hold the company blameless in making the arrangements on your behalf, and agrees that restitution or damages, if any are claimed, shall be sought directly from the suppliers. LCTC or MTF are not responsible for lost persons and for the expenses incurred while being lost. Each traveler assumes responsibility for staying with the group.

You will be notified of our decision regarding your application and scholarship request (if applicable) by Monday, February 20, 2012.

Upon acceptance into *The Rome Experience 2012*, the applicant is responsible for the following payments:

1. **\$1,500 deposit** for airfare is due by **Monday, March 5, 2012** (non-refundable after Monday, March 26, 2012)  
*Airfare and personal expenses are not included in the \$10,000 program fee.*
2. **\$10,000** tuition payment, less scholarship funds (if applicable), is due by **Friday, March 30, 2012** (non-refundable after this date).

All payments should be made by check payable to:  
**Midwest Theological Forum, 1420 Davey Road, Woodridge, IL 60517**

With my signature, I declare that I have read, understand, and accept the terms and conditions of *The Rome Experience 2012*:

Applicant's Signature:
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**THE ROME EXPERIENCE 2012  
APPROVAL FROM YOUR VOCATION DIRECTOR AND/OR BISHOP**

All applicants to *The Rome Experience* are required to obtain prior approval from their Director of Vocations and/or Bishop. The application will not be accepted without the signatures from your Vocation Director and/or Bishop below:

Print name of Director of Vocations or Bishop:

Signature of Director of Vocations or Bishop:

**Approval from your Bishop is required to apply for a scholarship.**

The cost of *The Rome Experience* is \$10,000 per seminarian, excluding airfare and personal expenses.

Print the name of Bishop:

Signature of Bishop:

Applications for *The Rome Experience* (May 21-July 2, 2012) program are due by:

**Priority Deadline:** Monday, January 16, 2012  
**Deadline:** Monday, February 13, 2012  
**Space Available Deadline:** Monday, March 12, 2012

Please contact *The Rome Experience* with any questions or requests:

Mrs. Charmaine Roth  
Program Director  
**The Rome Experience**  
1420 Davey Road,  
Woodridge, IL 60517  
**Phone:** 630-739-9750 ext. 28 **Fax:** 630-739-9758  
**Email:** [croth@mwtf.org](mailto:croth@mwtf.org)



## **THE ROME EXPERIENCE 2012 BIOGRAPHICAL ESSAY**

Please prepare a brief typewritten biography of yourself (minimum of 250 words). The essay should include but is not limited to answers to the following questions:

1. What influence did your family, especially your father or your mother, have on your vocation?
2. Describe your siblings and your relationship with them. Illustrate with stories if possible. If you have no siblings, describe a similar relationship with a family member or friend.
3. When did your Catholic Faith become important to you?
4. When did you first feel the call to the priesthood? Describe your religious education, including ideas, memories, and insights.
5. Describe the people who have influenced you most strongly (i.e., family members, priests, teachers, coaches, saints, etc.) If this influence has had an effect on your vocation, explain.
6. Did a priest have an influence on your vocation? Explain.
7. Did anyone ever ask if you had a vocation?
8. Name any organizations and/or activities in which you participate in (i.e., pro-life movement, youth groups, sports, etc.) and explain why they are important to you.
9. Why do you want to be part of *The Rome Experience 2012*?
10. What do you hope to gain or benefit by your participation in *The Rome Experience 2012*?

\*Please note that the biographical information you submit may be used for promotional materials for *The Rome Experience*. Please contact the Program Director if you have any concerns.



## THE ROME EXPERIENCE 2012 SEMINARIAN CODE OF CONDUCT

At the request of the Bishop's Advisory Board, the Pontifical University of the Holy Cross, and the residences where participants will be staying, the following code of conduct has been prepared for the participants of *The Rome Experience*. This Code of Conduct, in addition to the rules and regulations of any host institution or residence, shall govern your participation in the program at all times.

The Rome Experience has a set schedule designed to maximize the participants benefit from the program and to help each seminarian form a healthy relationship with the group. We have established a policy to reduce outside distractions to the program. Visits with family, friends, diocesan brother seminarians and priests will only be permitted during regularly scheduled free time. Please inform any family or friends visiting Rome of this policy. Visits from your Vocation Director, Rector, or Bishop may occur at any time convenient to them.

Rome, "The Eternal City," attracts millions of visitors each year. While several tours of Rome and its environs are part of *The Rome Experience* program, you are on a pilgrimage as a future priest who has come to Rome to pray and study next to the Chair of St. Peter and the saints, while providing a witness of your faith. The program has been designed to provide you with spiritual, intellectual, and cultural formation.

As a seminarian preparing for the priesthood, it is important to remember that many will judge the Catholic Church based on their encounter with you. Bear in mind that *you* are representing your Church, your bishop, and your diocese.

- I accept the expectation of my bishop that I conduct myself with due prudence at all times.
- While in public, I will wear clerical attire: a black shirt with clerical collar, black dress trousers, black dress shoes with black socks, and a black belt. Participants may also wear a black cassock, for liturgical functions.
- When not in public casual dress may be worn: trousers (no jeans or shorts) and a shirt with a collar. I will be fully dressed in the public areas of the residence (no pajamas or bare feet, shoes should be worn.) Clothes should be cleaned regularly.
- I will maintain attendance at all program activities and classes. I recognize that unauthorized absences are grounds for disciplinary action and possible dismissal from the program.
- I will observe the laws of the country in which the Program is located and all academic and disciplinary regulations in effect at all host institutions and residences.
- I understand that any and all illegal behavior both inside the residence, outside the residence, and in public is grounds for immediate dismissal.

- I understand that use of illicit drugs of any kind or the misuse of alcohol may result in immediate dismissal from the program.
- Use of the internet for pornographic material or the participation in any activities of an inappropriate sexual nature will result in immediate dismissal from the program.
- The choice of reading materials, extra-curricular amusements, and acquaintances are to be carefully considered to avoid scandal to the faithful and danger to the observance of celibate chastity.
- I understand that if I do not participate in program activities, if I am consistently resistant to formation, or am constantly absent from required events, I may be dismissed from the program.
- I will maintain good personal hygiene and grooming habits. The basic expectation is that I will shower, shave, and brush my teeth each day before the first event.
- The residence will have triple accommodations. I will be considerate of my roommates. When using a CD player or other electronic devices, head phones would be appropriate. Televisions are not allowed in the rooms.
- I understand that it is necessary to keep my room orderly and clean.
- I will request permission from the Program Director if I need to leave the residence, class, activity, etc., or go out alone for any reason.
- Participant(s) who wish to leave the residence for excursions, amusement, etc. must receive approval from one of the Program Directors, and must be accompanied by at least one other participant or a Program Director.
- I will address any concerns with the Directors of the Program before complaining to others.

***Faculty Authority and Dismissal from Program.*** I understand that BAC & MTF reserves the right to dismiss me from the Program at any time should my actions or general behavior be deemed in violation of this code of conduct or should it be determined that my conduct impedes or obstructs the progress of the Program in any way, or should it, in any fashion, undermine the credibility and reputation of the Program. Should the Faculty, an Instructor, or any other official representative of *The Rome Experience* decide, that I must be dismissed from the Program because of a violation of these stated rules, I recognize that this decision will be final.

By my signature, I agree to conduct myself in accordance with the Seminarian Code of Conduct at all times.

**-Signatures -**

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Name of my Seminary \_\_\_\_\_

Name of my Archdiocese/Diocese \_\_\_\_\_

Name of my Archbishop/Bishop \_\_\_\_\_



## THE ROME EXPERIENCE AGREEMENT

I, \_\_\_\_\_, a seminarian at \_\_\_\_\_  
(Name of Seminary), in the Diocese of \_\_\_\_\_ (Name of Archdiocese/Diocese),  
am participating in *The Rome Experience* Program in Ars, France and Rome, Italy from Monday, May 21,  
2012 until Monday, July 2, 2012.

I hereby agree and represent that:

- 1. Health Insurance.** I have or will secure health insurance to provide adequate coverage for any injuries or illnesses that I may sustain or experience while participating in *The Rome Experience* Program herein referred to as the "Program." By my signature below, I certify my health care coverage will adequately cover me while outside the United States, and hereby release members of the Bishops Advisory Committee, their representative dioceses, and Midwest Theological Forum hereafter referred to as "BAC & MTF" and the employees and agents of the above, from any responsibility or liability for expenses incurred by me for injuries or illnesses (including death).
- 2. MTF's Right to Alter Program.** I understand that, although MTF will attempt to maintain the Program as described in its publications and brochures, it reserves the right to change the Program, including the duration, curriculum, itinerary, travel arrangements, vendors, or accommodations, at any time and for any reason, with or without notice, and that neither the BAC & MTF, or the employees and agents of either, shall be responsible or liable for any expenses or losses that I may incur because of these changes.
- 3. Choice of Law and Venue.** I agree that, should there be any dispute concerning my participation in the Program, I agree fully to submit my issue to the archbishop or bishop of my archdiocese or diocese, recognizing that as a seminary student that I fall fully under his jurisdiction and the Code of Canon Law (1983).

### -Release and Waiver of Liability-

- 4. Release of Liability.** I understand that, although BAC & MTF have made every reasonable effort to assure my safety while participating in the Program, there are unavoidable risks in international travel. For and in consideration of the opportunity to participate in the Program involving travel and study outside the United States of America, I, being of lawful age and under no legal disability, on my own behalf, as well as on behalf of my heirs, executors, administrators, and assigns, do hereby release BAC & MTF and their employees, officers, and agents, from any liability, cause of action, demand for damages, expenses, compensation and claim on account of or in any way growing out of personal injuries, death, or property damage, which may result from

my participation in the Program. I further expressly waive my right to bring a legal action of any kind for any of the claims released.

5. **Medical Agreement and Release.** If an emergency develops that requires immediate medical care, I authorize my superiors or representatives of *The Rome Experience* Program to secure any necessary treatment, including hospitalization and/or the administration of an anesthetic and surgery. I furthermore agree to inform in writing my superiors, *The Rome Experience* Program representative(s), or other representatives of the Program, of any medical, medicinal, diabetic, nutritional, or other related issues that they should be made aware of.
6. **Use of Photos and Testimonials.** I agree that BAC & MTF may use photographs taken during the program and statements made in written program evaluations in promotional literature, websites, or posters. BAC & MTF reserves the right to copyright all photos and promotional literature used by the program.
7. **Independent Travel.** I agree to exempt BAC & MTF from any responsibility for any independent travel during the program (including, but not limited to, alternate airfare to/from *The Rome Experience* Program site, recreational travel before, during, or after *The Rome Experience* Program, or other activities not directly related to *The Rome Experience* Program participation). I assume responsibility for my own health, safety, and responsibility for all of my luggage and valuables when undertaking independent travel.
8. **Severability.** I agree that, should any provision or aspect of this agreement be found to be unenforceable, that all remaining provisions of the agreement will remain in full force and effect.
9. **Complete Agreement.** This agreement represents my complete understanding with BAC & MTF, concerning their responsibility and liability for my participation in the Program, and this agreement supersedes any previous or contemporaneous understandings I may have had with MTF regarding the Program, whether written or oral.
10. **Capacity.** I represent that I am at least eighteen years of age or, if not, that I have secured below the signature of my parent or guardian as well as my own. I further represent that my agreement to the provisions herein is wholly voluntary, and further understand that, prior to signing this agreement, I have the right to consult with my archbishop or bishop (or his representative), my vocational director or other advisers, counselors, or attorney(s) of my choice.

**-Signatures -**

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Name of my Seminary \_\_\_\_\_

Name of my Archdiocese/Diocese \_\_\_\_\_

Name of my Archbishop/Bishop \_\_\_\_\_



## ST. JOSEMARIA INSTITUTE

www.stjosemaria.org

### Scholarship Application for The Rome Experience 2012

The St. Josemaria Institute has established a scholarship fund for applicants to *The Rome Experience* who meet the qualifications of the program and are in need of financial assistance.

The scholarship funds can only be applied toward the program fee. The cost of the six-week program is \$10,000 per seminarian, which includes: a five-day silent retreat in Ars, France; room and board; tours of Rome and its environs; tuition; and, honorarium fees. Airfare and personal expenses are not included in the program fee.

To apply for the scholarship:

- Complete the form below and return it with your application to *The Rome Experience*.
- Approval by your bishop is required to apply for the scholarship. See page 4 of *The Rome Experience* application.
- Applications must be received by Monday, February 13, 2012.

#### APPLICATION:

Please select the scholarship amount for which you are applying:

\_\_\_ **Partial scholarship:** \_\_\_\$1000 \_\_\_\$2000 \_\_\_\$3000 \_\_\_\$4000 \_\_\_\$5000

\_\_\_ **Full scholarship:** There are a limited number of full scholarships (\$10,000) available to dioceses experiencing severe financial difficulties.

**Briefly explain your need for this scholarship** (type or print your response):

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All scholarship recipients are required to assist with the onsite needs of the program. Please check those activities with which you feel comfortable assisting with during the program:

- \_\_\_\_\_ Writing a daily journal of activities
- \_\_\_\_\_ Taking photographs daily
- \_\_\_\_\_ Posting updates on *The Rome Experience* Facebook page daily
- \_\_\_\_\_ Videotaping lectures daily (video camera will be provided)

Please share any additional skills that you possess that you feel would contribute to *The Rome Experience* 2012 program (type or print your response):

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The expectations and responsibilities will be explained to you during your telephone interview with the Program Director, Mrs. Charmaine Roth. Your task(s) will be assigned upon acceptance into the program.

The scholarship application must be received by **Monday, February 13, 2012**. You will be notified of our decision regarding your scholarship application by Monday, February 20, 2012.

Please submit this application with your application to *The Rome Experience*.

**SIGNATURE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

For more information about the St. Josemaria Institute and St. Josemaria Escriva visit our website [www.stjosemaria.org](http://www.stjosemaria.org) or contact us at [info@stjosemaria.org](mailto:info@stjosemaria.org).