



SECULAR FRANCISCAN ORDER

Five Franciscan Martyrs Region

Florida, South Georgia, Lower Alabama

<https://www.ffmr-ofs.org/>

PRE-VISITATION QUESTIONNAIRES

(Two Collaborative, One Individual, and One Optional Individual Questionnaire)

Revised 2024

Fraternal and Pastoral Visitation to the Fraternity

Instructions for use

A Visitation ought to be a graced time for the fraternity. In order to evaluate a fraternity in the allotted time, the Visitors must rely on the questionnaire as a valuable tool.

The completion of Part I and Part II of this questionnaire is meant to be a collaborative effort accomplished by the Fraternity Council meeting together to discuss and reflect upon the questions and their answers. These questionnaires are not intended to be filled out by just one person.

Part I asks Council to assess itself so the Fraternal Visitor can make a proper evaluation of the fraternity.

Part II asks Council to assess the spiritual assistance provided by its Spiritual Assistant, if it has one, so the Pastoral Visitor can make a proper evaluation of the assistance provided.

Part III asks the Spiritual Assistant, if there is one, to assess him/herself so the Pastoral Visitor can make a proper evaluation of the spiritual assistance provided.

*Copies of both Parts I, II and III of the completed questionnaires are to be returned to both Visitors at least **TWO WEEKS** before the visitations, and a copy should also be saved in the records of the fraternity.*

*Part IV is intended to be completed by individual Councilmembers, EACH of whom has the right to fill it out him/herself and send it in directly to both of the Visitors, if he/she so chooses, where it will be reviewed in confidence. Please send this at least **TWO WEEKS** before the visitation*

The questionnaires may be completed by editing the file and sending the completed, saved questionnaire to each of the Visitors. For responses to Part IV, each respondent may extract those questions, edit the file to add the responses, and send the completed Part IV to the Visitors.

In those sections where a scale is requested, if the answer is other than Satisfactory, please provide specific supporting detail. Also describe how you determined each response. Council should feel free to provide additional information for the Visitors on each matter.

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Part I: Collaborative Responses by Council for Fraternal Visitation

This part seeks Council's self-evaluation prior to a Fraternal Visitation, and is to be completed collaboratively by all members of Council.

1 Basic Information

Fraternity Name: _____

Provide **TWO** addresses (& Emails) where official mail can be sent:

_____	_____
_____	_____
_____	_____
_____	_____

Names and positions of Councilmembers that are different than in the last Annual Report: (or attach list)

Are any Council positions currently vacant? If so, list which ones and how long they have been vacant.

When does the Council meet? _____ Where? _____

How many times has Council met in person in the preceding 12 months? _____

How often has Council met by remote/electronic means? _____
If so, list the means used:

When do all the members gather monthly? _____

How did Council determine its response to the questions which follow? If different methods are used for different sections, list the method in the appropriate section.

Statistics: List the number of each status if different from the National Database:

Active Professed Members:	_____	Orientees:	_____
Active-Excused Members:	_____	Affiliates:	_____
Candidates:	_____	All other statuses:	_____
Inquirers:	_____	Spiritual Assistants:	_____

2 Council Evaluations (remember that this is a self evaluation of your Council and fraternity. If response is other than Satisfactory, provide specific details to explain your responses)

(Only check <u>ONE</u> box per line)	Excellent	Very Good	Satisfactory	Need to Improve
As a team:				
Set goals, make progress towards them:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intra-Council communication:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention, availability, and responsiveness to needs of Members:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encourage, inspire, and train new servant leaders:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encourage members to take active role in discussions, Ongoing Formation presentations:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minister:				
Set agenda for Council and gatherings:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support Councilmembers in their duties:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follow-up on Council decisions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintain records:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complete and file Annual Report on time:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attend Family Gathering and Annual Meeting:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Request Elections and Visitations in a timely manner:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support Formation Director and those in Initial Formation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vice Minister:				
Discharge Minister duties and responsibilities as needed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secretary:				
Keep Council minutes:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintain record of correspondence:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keep attendance records:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintain and update Fraternity Register:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notify Regional Database Manager in timely manner of any changes to member status or information:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collect material for Archives/History:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilitate intra-Council communication:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treasurer:				
Financial planning (e.g., budget):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pay all expenses authorized by Council:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Record in register all donations received,
 expenditures made:

Prepare monthly financial report to Council:

Prepare and submit Annual Treasurer Report:

Make Fair Share payment by Jan 31 each year:

Report financial health of Fraternity to members:

Upon request, provide individual members with a statement
 of contributions for tax purposes:

Formation Director:

Coordinate activities of Formation Team:

Maintain written records of those
 in Initial Formation:

Follow up on initial contacts about the Order:

Encourage those in Initial Formation to
 take part in Regional activities:

Offer a variety of means to convey
 formation topics (text, video, interactive):

If there is a Spiritual Assistant:

Attendance at Council meetings:

Attendance at Fraternity gatherings:

Comments:

Who on Council is assigned to follow up on inquiries about the Order? _____

When did the person holding the Treasurer position last change? _____

If the change was since the last visitation, was an audit conducted? {YES} {NO} {NA}

If so, enter who conducted the audit and attach a copy of the report. _____

Does the Fraternity have its own checking account? {YES} {NO}

If so, who is authorized to sign the checks? _____ , _____

Does the Fraternity have its own tax id (EIN number)? {YES} {NO} {UNSURE}

If so, has this EIN been reported to the National Treasurer? {YES} {NO} {UNSURE}

3 Spirituality

(Only check ONE box per line)

	Excellent	Very Good	Satisfactory	Need to Improve
Liturgical Life:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of spiritual programs:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunities for spiritual growth (retreats, days of recollection, etc.):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Embodiment of Franciscan gospel values:

Comments:

Describe the common prayer that is prayed at gatherings (Liturgy of the Hours, other).

4 Formation Program

(Only check <u>ONE</u> box per line)	Excellent	Very Good	Satisfactory	Need to Improve
Quality of Initial Formation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Ongoing Formation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Efforts promoting vocations to the OFS:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ongoing formation of Council:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

4a. Formation Team

Is there a Formation Team? If so, please list their names and emails. Also indicate how they are assigned to various roles, and how well they present the topics required in Initial Formation.

4b. Initial Formation:

When is Initial Formation held?

How are formation topics being incorporated into Initial Formation within your fraternity? What books/resources (e.g., *For Up To Now* manual, *Franciscan Journey*) are you using to do it?

Describe how the Rule and General Constitutions are incorporated into Initial Formation.

4c. On-Going Formation:

Describe the ongoing formation held during the Council meetings.

Describe the formation structure and what form the instruction takes.

Describe how ongoing formation topics for the fraternity are chosen. List which book(s) are you using, if any.

Do your members break up into small groups to discuss the topic so that all may actively participate? Do all your members act as Moderators at some point, or do the same ones continue to act in this role?

4d. How can the Regional Council best support your formation efforts?

5 Effective Communication by Council

(Only check <u>ONE</u> box per line)	Excellent	Very Good	Satisfactory	Need to Improve
Council meetings and actions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monthly gatherings:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities outside of gatherings:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newsletter (if any):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Website (if any):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social media (if any):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal contact:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open to member questions and suggestions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting information <u>TO</u> members:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtaining information <u>FROM</u> members:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting information <u>TO</u> Regional Fraternity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtaining information <u>FROM</u> Regional Fraternity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness of Fraternal Visits:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness of Pastoral Visits:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6 Outreach/Effective Evangelization

(Only check ONE box per line)

	Excellent	Very Good	Satisfactory	Need to Improve
Rate your fraternity’s overall outreach:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Through the Formation Commission:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Through the JPIC Commission:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Through the Youth/Young Adult Commission:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fraternity apostolates/works of charity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation of members in apostolates:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public relations:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation at the Regional level:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation with other fraternities:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rate your fraternity’s involvement with or projects with:				
The host Parish:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Diocese:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Franciscan friars/sisters:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local/Regional Franciscan projects:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National Franciscan projects:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Describe the fraternity’s involvement with any National, Regional, Family, and Local Franciscan projects:

List the name and email of the person(s) on your JPIC Commission.

List the name and email of your Youth Coordinator.

7 Narrative Commentaries *(remember that this is a self evaluation of your council)*

7a How does Council build relations among themselves?

- 7b How does Council build community among the fraternity's members?
- 7c What do the members expect the fraternity Council to do?
- 7d What do you consider your greatest "successes" over the last three years?
- 7e What do you consider to be your greatest challenges over the last three years? How did you address them?
- 7f What are your fraternity's goals for the next three years?
- 7g What do you consider to be your greatest challenges going forward?
- 8 In what way can the Regional Fraternity be of better service to your Fraternity?

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Part II: Collaborative Responses by Council for Pastoral Visitation

This part seeks Council’s self-evaluation prior to a Pastoral Visitation, and is to be completed collaboratively by all members of Council.

Name of Fraternity, City, Visitation Date:

1 Spiritual Assistance

(Only check <u>ONE</u> box per line)	Excellent	Very Good	Satisfactory	Need to Improve
Overall rating of Spiritual Assistance provided:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of Spiritual Assistant for members:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of Spiritual Assistant for Council:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of interactions with Regional Spiritual Assistant:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

If the Fraternity does not have a Spiritual Assistant, describe the steps taken to obtain one.

Does the Fraternity Council understand that they are responsible for sending the Spiritual Assistant (and covering the costs) to the Annual Regional Meeting, and ongoing Spiritual Assistant formation gatherings within the region? {YES} {NO}

How has your Spiritual Assistant, if you have one, helped Fraternity members to grow in their vocations?

SECULAR FRANCISCAN ORDER

Five Franciscan Martyrs Region

Part III: Responses by Spiritual Assistant for Pastoral Visitation

*This part seeks the Spiritual Assistant's self-evaluation prior to a Pastoral Visitation, and is to be completed by the Spiritual Assistant alone. Submit the responses to the Pastoral Visitor at least **TWO WEEKS** before the visitation.*

Name of Fraternity, City, Visitation Date:

1. Basic Information

Please confirm the province this fraternity is bonded to:

Who appointed you as the Spiritual Assistant (S.A.) for the fraternity you are currently serving?

How many years have you served as S.A. to this fraternity?

2. Council and Member Interactions

2a How often do you attend Fraternity gatherings and Council meetings?

2b Does your Fraternity Council understand that they are responsible for sending you (and covering the costs) to the Annual Regional Meeting, and ongoing Spiritual Assistant formation gatherings within the region? {YES} {NO}

2c How do you see your participation in both ongoing and initial formation? (Remember we are not there to take over formation, we are there to assist them!)

2d Are you available to the individual members for support and questions? Please expound.

2e If you are a priest or deacon you will, just as a lay Spiritual Assistant, have to make the appropriate adjustments in your calendar to cover your parish/diocesan responsibilities in advance to ensure your availability to participate in the Spiritual Assistant gatherings. Have you encountered any difficulties in doing this?

3. Formation, Spirituality

3a How do you feel about the fraternity's Spiritual and charismatic development?

3b What do you see as their biggest challenges? How can you help them to overcome those challenges?

3c What is your own vision of your service to this fraternity?

3d What have been your biggest challenges in serving them?

4. Region, S.A. Community Interaction

4a What kind of support would you appreciate from the Region's S.A. community, the Regional Spiritual Assistant, or the Regional Executive Council?

4b How often do you review the *Handbook for Spiritual Assistants, Statues for Spiritual and Pastoral Assistance, or Franciscan Family Connections*?

4c Are you currently on the Spiritual Assistants mailing list? {YES} {NO}

4d What would you like to see included in future ongoing formation sessions for the Spiritual Assistants for the Region?

N.B. The Spiritual Assistants for the Region is a community of brothers and sisters who strive to learn, grow, develop and support one another. Just as it is important for you to be active in your fraternity, it is just as important for you to be active in the community of Spiritual Assistants for all of us to be lively and vibrant resources for the communities we serve, and for each other.

Please make time during the Pastoral Visit to spend some one-on-one time with us so that we can review some of the things we need to share, and hear from you! Thank you for serving!

SECULAR FRANCISCAN ORDER

Five Franciscan Martyrs Region

Part IV: Individual Councilmembers Evaluation (optional)

*This part is meant to solicit the views of **each individual Council member**; it is **not** a collaborative effort. It is intended for both Fraternal and Pastoral Visitations. The Minister should distribute a copy of form to each Council member. When it is completed, each Council member mails one copy directly to the Pastoral Visitor, one to the Fraternal Visitor, and one to the Family Councilor at least two weeks prior to the date of the visit, and retains a copy for ease of reference during the Visitation. Answers can be provided on a separate page, or this file can be edited and the electronic copy sent to the appropriate persons.*

Name of Fraternity, City, Visitation Date:

This first set of questions relates to a Fraternal Visitation.

1. Does your fraternity have monthly in-person Council meetings? Please explain the structure, style, location, content and length.
2. How faithfully do the Council members attend Council meetings and gatherings?
3. From your observation, do the Council members fulfill their duties responsibly?
4. How would you rate the Council in regard to task performance for Council meetings and gatherings? Explain why. *Excellent Very Good Satisfactory Needs Improvement*
5. From your observation, does the Council give priority to the spiritual well-being and growth of your Fraternity? Please explain.
6. From your observation, does the Council seek to give creative leadership to your Fraternity or just maintain the status quo?
7. In your view, what are the strengths of your Fraternity's Council?
8. How would you rate the leadership of your Fraternity's Minister? Why?
Excellent Very Good Satisfactory Needs Improvement
9. Does the Minister fulfill his/her responsibilities to your Fraternity by making sure that each Council member fulfills his or her responsibilities? If not, what suggestions would you make to remedy this?
10. Is the Minister collaborative in his/her efforts to serve your Fraternity or does he/she seem to want to "go it alone?"

11. To what extent does your Minister share with you information that comes from the Region, National or International Fraternities?
12. Are your Fraternity's records maintained faithfully and accurately? If not, what suggestions would you make to remedy this?
13. Is financial planning for your Fraternity done according to Franciscan values and fiscal responsibility? If not, what suggestions would you make to remedy this?
14. How would you rate your monthly Fraternity gatherings? Why?
Excellent Very Good Satisfactory Needs Improvement
15. What is your Fraternity Council doing to develop a greater sense of community within your Fraternity?
16. Would you say that the members of your Fraternity are able to share in the long and short-range planning for the growth of your Fraternity? If not, what suggestions would you make to remedy this?
17. Is the *OFS Ritual* used regularly at gatherings, particularly for the Rites of Welcoming, Admission, Profession? If not, please explain.
18. Does your Fraternity use the *Liturgy of the Hours* regularly at its meetings? If not, what other forms of common prayer are used?
19. In your view, what is your Fraternity's potential to attract new members?
20. In your view, does your Fraternity understand and celebrate its identity as Franciscan penitents while encouraging growth in ongoing conversion in its brothers and sisters? If not, what suggestions would you make to remedy this?
21. What would you see as the short and long-range future of your Fraternity?
22. Does your Fraternity feel an accountability and responsibility with regard to the Regional and National Fraternities? If not, what suggestions would you make to remedy this?

The remaining questions relate to a Pastoral Visitation.

23. How do you participate in the formation processes in your fraternity, both initial and ongoing?
24. Have you participated in at least one Franciscan retreat / day of reflection per year?

25. Is there anything you would like to privately discuss with the Fraternal and/or Pastoral Visitor? If you feel you can be specific, please provide an explanation; if you are unable to be specific, please ask to meet with the Visitor(s) privately. It will be explained to the Council as a whole that such conversations will be expected, so no one should feel uncomfortable in expressing such a desire.

Name, Council Position (*optional*): _____

Fraternity Name: _____ **Date completed:** _____