



APPLICATION FOR THE RECEPTION OF CLERGY

Mail or email PDF to the Bishop Ordinary.

Please print clearly. While all statements on this application will be treated with confidentiality, copies will be made for each examiner. Answer all questions, using additional sheets of paper where necessary.

Date of Application: _____

Application Fee: Before sending this application, please consult the Bishop to the Ordinary regarding the current application fee (for background check and administrative expense), which is due before the application can be considered.

Full Legal Name: _____

Home Address: _____

Work Address: _____

Mobile Phone: _____ Home Phone: _____

Work Phone: _____

Email: _____

Status Sought: Postulant for Holy Orders ☐ Reception as Deacon ☐ Reception as Presbyter ☐

Birth Date: _____ Hometown (city and state): _____

EDUCATION

High School: _____ Year Graduated: _____

College: _____ Years Attended: _____ Year Graduated: _____

Degree(s): _____ Major: _____ Minor _____

College Honors: _____

Extracurriculars: _____

Seminary: _____ Years attended: _____ Year Graduated: _____

Degree: _____ Honors/Special Interests: _____

Advanced Degrees (what degrees and where): _____

MILITARY SERVICE

Branch: _____ Rank or Rating at Separation: _____

Discharge Type: _____ Date of Discharge: _____

HOME AND FAMILY

Married ☐ Single ☐ Widower ☐ Divorced ☐ Wife's Name: _____

Wife's Education: _____ Wife's Vocation: _____

Wife's Avocation, Interests, Activities: _____

Your Wedding Date: _____ Have you ever been legally separated? _____

Children's Names (ages in parentheses): _____

Children's Education or Grade Level: _____

Children's Interests and/or Activities: _____

HEALTH

Height: _____

Weight: _____

Current Health Status: _____

Date of Last Physical: _____ Physician and Office Address: _____

Have you ever been or are you now being treated for any of the following?

Hypertension _____ Treatment _____ Completed/Ongoing? _____

Heart Disease _____ Treatment _____ Completed/Ongoing? _____

Sexually Trans. Disease _____ Treatment _____ Completed/Ongoing? _____

Drug Addiction _____ Treatment _____ Completed/Ongoing? _____

Alcoholism _____ Treatment _____ Completed/Ongoing? _____

Have you ever been diagnosed as suffering depression or a nervous disorder? _____

What was the diagnosis? _____

When was it made? _____ Doctor's Name: _____

Source and Outcome of Treatment: _____

Have you ever seriously entertained suicidal desires or intent? _____

Have you ever been counseled for spousal abuse? _____

Do you have any physical or mental conditions that might challenge you in carrying out ordained ministry?

COMMUNITY INTEREST

Are you a member of a service or social organization (describe)? _____

Are you politically active? _____ For whom and how? _____

Have you ever been arrested? _____ When? _____

On what charge? _____ Convicted? _____ Jail/Prison Time? _____

Are you active in your community? If yes, how so? _____

PROFESSIONAL

In what professions did you labor before seeking ordained ministry? _____

Are you presently employed? _____ Where? _____

Name and Phone or Manager: _____

ECCLESIASTICAL *(Please, include dates where possible.)*

Baptized? _____ Where? _____

Confirmed? _____ By Whom? _____ Where? _____

Current Parish Membership (church name, address, phone): _____

Denomination: _____

Have you ever been under church discipline or excommunicated? Explain. _____

Have you ever attempted to enter into Holy Orders through another Anglican jurisdiction or otherwise? If so, please explain. _____

PROFESSIONAL *(Only for those who are ordained.)*

Date Ordained Deacon: _____ Date Ordained Presbyterian: _____

Ordained by Whom and in What Denomination or Jurisdiction: _____

❖ On a separate sheet, please detail the process of preparation and examination for your ordination.

Current Parish and Denomination

Address: _____

_____ Phone: _____

Your Title or Position: _____

Name of Member in Lay Leadership: _____

Reason for leaving? On good terms? _____

Date Installed: _____

Previous Parish or Denomination

Address: _____

_____ Phone: _____

Your Title or Position: _____

Member in Lay Leadership during Your Incumbency: _____

Reason for leaving? On good terms? _____

Dates of Incumbency: _____

Previous Parish and Denomination

Address: _____

_____ Phone: _____

Your Title or Position: _____

Member in Lay Leadership during Your Incumbency: _____

Reason for leaving? On good terms? _____

Dates of Incumbency: _____

Previous Parish and Denomination

Address: _____

_____ Phone: _____

Your Title or Position: _____

Member in Lay Leadership during Your Incumbency: _____

Reason for leaving? On good terms? _____

Dates of Incumbency: _____

DOCTRINAL (*Only for those who are ordained.*)

Please answer all questions on a separate sheet, as completely as possible. Please type your answers.

1. Distinguish the orders of ministry. In the course of your discussion, note the number and functions of the orders.
2. What brought you to the Reformed Episcopal Church?
3. What is your position on liturgical worship? Which of the following Prayer Books best expresses your ideas on liturgical worship and why (1662, 1785/1786, 1928, 1933, ASB, AAPB)?
4. Articulate your views on the Lord's Supper.
5. Articulate your position on the sacrament of Holy Baptism. Do you believe in infant Baptism? Are your own children baptized?
6. What are your views on the inerrancy and infallibility of Holy Scripture? What is your position on verbal inspiration? What is the authority of the Church regarding the Scriptures?
7. How do you understand the Creation account in Genesis chapters one and two?
8. How would you assess your familiarity with the Thirty-nine Articles of Religion? Do you embrace the Articles? Are there areas of reservation or disagreement and, if so, where and why?
9. Summarize your position on the Doctrine of the Church. Compare and contrast episcopacy with other forms of church polity.
10. What are your views on clerical attire? Include a discussion of both the use of the clerical collar and liturgical vestments. What is your present practice?
11. What is your position on the gifts of the Spirit?
12. Are you willing to conform yourself to the traditions and customs of the Reformed Episcopal Church so long as they are not contrary to Holy Scripture