

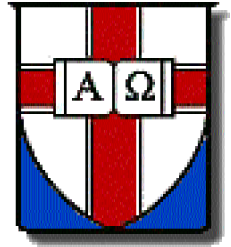
Application for the Reception of Clergy

Reformed Episcopal Church

4142 Dayflower Dr. • Katy, TX 77449

800/732-3433 royalrec1@aol.com

REFORMED
EPISCOPAL



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.

Name _____

Address (home) _____

City _____ State _____ Zip Code _____

Address (work) _____

City _____ State _____ Zip Code _____

Telephone (home) _____ Telephone (work) _____

Fax _____ Internet _____

Status sought:

Postulant for Orders

Reception as Deacon

Reception as Presbyter

Birthdate (mo./day/yr.) _____ Hometown(city and state) _____

Education

High School _____ Year graduated _____

College _____ Years attended _____ Year graduated _____

Degree(s) _____ Major _____ Minor _____

College Honors _____

Sports/Fraternity _____

Seminary _____ Years attended _____ Year graduated _____

Degree _____

Advanced Degrees (what degrees, where?) _____

Military Service

Branch _____

Discharge type _____ Date of discharge _____

Rank or Rating at Separation _____

Home

Marital status _____ Wife's name _____

Wife's education _____ Wife's vocation _____

Her avocation, interests, activities _____

Your wedding anniversary _____

Have you ever been divorced? _____ Legally separated? _____

Children's names (put ages in parentheses) _____

Children's education and grade level _____

Children's interests and/or activities. _____

Health

Height _____ Weight _____

Current health status _____

Date of last complete physical _____

Physician's name & Office address _____

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

Hypertension _____ Treatment _____ Completed? _____

Heart disease _____ Treatment _____ Completed? _____

Sexually transmitted disease _____ Treatment _____ Completed? _____

Drug addiction _____ Treatment _____ Completed? _____

Alcoholism _____ Treatment _____ Completed? _____

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

What was the diagnosis? _____

When was it made? Doctor's name. _____

What was the course of treatment? _____

Have you ever seriously entertained suicidal desires or intent? _____

Have you ever been counselled for spousal abuse? _____

Do you have any physical or mental disabilities that might serve to particularly challenge you in ordained ministry?

Special Interest

Are you a member of a service or social organization (*Kiwanis, Rotary, country club*) _____

Are you politically active? _____ For whom? _____

Have you ever been arrested? _____ When? _____

What was the charge? _____

Convicted? _____ Jail time? _____

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

Business

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

Are you presently employed? Where? _____

Name & phone number of manager _____

Ecclesiastical (*please include dates, where possible.*)

Baptized? _____ Where? _____

Confirmed? _____ By whom? where? _____

Current parish membership (*church name, address, phone no.*) _____

Denomination _____

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

Professional (only for those ordained)

Ordained Deacon (date) _____ Ordained Presbyter (date) _____

Ordained by whom _____

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

Current Parish (include denomination) _____

Address _____

Your title or position _____

Member of lay leadership _____

Reason for leaving? On good terms? _____

Date installed _____

Previous Parish (include denomination) _____

Address _____

Your title or position _____

Member of lay leadership during your incumbancy _____

Reason for leaving? On good terms? _____

Dates of incumbancy _____

Previous Parish (include denomination) _____

Address _____

Your title or position _____

Member of lay leadership during your incumbancy _____

Reason for leaving? On good terms? _____

Dates of incumbancy _____

Previous Parish (include denomination) _____

Address _____

Your title or position _____

Member of lay leadership during your incumbancy _____

Reason for leaving? On good terms? _____

Dates of incumbancy _____

Doctrinal (only for those ordained)

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

1. Distinguish the orders of ministry. In the course of your discussions, 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 represents your ideas on liturgical worship (1662, 1785/6, 1928, 1933 REC, 1979, ASB, AAPB), and why?
4. Please articulate your views on the Lord's Supper.
5. Please articulate your position on the Sacrament of 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 of Religion? 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?