

HOLY ORDERS, FORM 1: GENERAL INFORMATION

To: The Bishop
The Episcopal Diocese of Tennessee
3700 Woodmont Boulevard Nashville, Tennessee 37215

(In addition to mailing the form to the above address, you may submit the forms electronically to our Diocesan Administrator Kim Jones at kjones@edtn.org, and the Canon to the Ordinary at jhoward@edtn.org).

This social history form will be used by the Commission on Ministry. It is treated as confidential information.

1. Full name

Last First Middle

2. Mailing Address

Street City State Zip

3. Permanent home address, if different from mailing address:

Street City State Zip

4. E-mail address _____

5. Phone: Home _____ Work _____ Cell _____

6. Birth Date: _____ Sex: M _____ F _____

7. Present congregational affiliation _____

How Long? _____

8. When, and by whom, were you baptized? **(Please attach a copy of baptismal certificate, or of the church record of baptism to this form).**

9. When, and by whom, were you confirmed? **(Please attach a copy of confirmation certificate, or of the church record of confirmation to this form).**

10. Length of time in the Diocese of Tennessee _____

11. Present occupation _____

12. Employment history – List last five (5) positions held:

<u>Employer</u>	<u>Work Performed</u>	<u>Dates of Employment</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

13. Education: List schools attended, dates, degrees obtained, and submit academic transcripts.

<u>Institution</u>	<u>Dates</u>	<u>Degree</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

14. Marital Status: Please state present status. If married, widowed, separated or divorced give dates. If previous marriage(s), give date(s) (for applicant and/or spouse):

15. Spouse's name: (include maiden name if applicable)

Spouse's occupation: _____

Denomination of baptism: _____

Years of schooling past high school _____ Degrees _____

Give a brief evaluation of spouse's feelings regarding mate's intent to enter the ordained ministry:

16. Children: Give names, age and sex of each child.

Name

Age

Sex

<u>Name</u>	<u>Age</u>	<u>Sex</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

17. If there are children age 10 or over, give a brief account of the children's feelings about your intent to enter the ordained ministry.

18. Parents names and marital status. If separated, divorced or deceased, give dates.

19. Briefly describe each parent's principal occupation and level of education.

20. Religious affiliation of father: _____

Of mother: _____

21. Give a brief description of each parent's feelings regarding your intent to enter the ordained ministry:

22. Siblings: List age, sex, years of education and occupation of each.

<u>Name</u>	<u>Age</u>	<u>Sex</u>	<u>Education</u>	<u>Occupation</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

23. Have you ever applied for postulancy before? Y / N

If so, state where and the date:

24. Please describe your intended servanthood ministry. How many hours per week do you give to it, how long have you been engaged in it?

25. How might this ministry change when/if you exercise it as an ordained person?

26. Please provide names, addresses and phone numbers for three references. At least one should be someone able to evaluate your ministry from the perspective of an outsider.

27. Please submit a photograph of yourself.