Dear Applicants:

This packet contains everything you will need, in order to apply to discern a possible vocation to serve as a priest or deacon. The Holy Orders section of our website (www.epiok.org, under resources-for the clergy) has more information about what is involved. Please make sure you have read and understood it before applying. We need you to be aware that our vocations from God are discerned in community, with many faithful people advising the Bishop and no guarantees about the timeline or outcome of any particular discernment.

The two documents all applicants are asked to submit are both included in this packet. They include the Application (pp. 3-7) and the Authorization and Release (pp. 8-10). Please make sure to sign both documents and to initial each page of the release at the bottom.

Please also make sure to talk first to your Rector/Vicar/Priest-in-charge, whose support is required before you begin your part of the application. You should have been talking with your priest about your sense of a possible vocation to Holy Orders for some time before applying for the Aspirancy Program. In addition to the two documents you must provide, we must have a letter from your Rector/Vicar/Priest-in-charge and an endorsement from your Vestry or Bishop’s Committee in order for your application to be considered. (Instructions for this letter, as well as the endorsement form, may be downloaded as the “Priest’s Packet” from our website.) We recommend that you give yourselves a couple of months before the May 31 deadline to assemble needed information and answer the questions we are asking.

All materials related to your application are due in our office no later than May 31 of each year. Completed applications and forms should be sent in by hard copy in the U.S. Mail to the Rev. Canon Dr. Bill Carroll, 924 N. Robinson, Oklahoma City, OK 73102.

For questions about the process, please contact Canon Bill (405-232-4820; canonbill@epiok.org) or his Administrative Assistant, Ms. Diane Ellsworth (405-232-4820; dellsworth@epiok.org).

Faithfully,

The Rt. Rev. Dr. Edward J. Konieczny
Bishop of Oklahoma
The point of vocation is the point at which
“your deep gladness and the world’s deep hunger meet.” (Frederick Buechner)

The application and questionnaire that follows is not your first step in considering a possible calling to Holy Orders. By this time, you have had conversations with family, friends, mentors—including your parish priest—and prayers before God regarding your sense of call. Your priest and vestry should have indicated a formal willingness to sponsor your Aspirancy with the diocese.

The enclosed material is the first step in a diocesan process of discernment that will help the Bishop, Commission on Ministry and you know much more clearly the nature of your call and whether you have a place in the ordained ministry of the Episcopal Church. As the application asks, please give it your best and most careful time and attention. Take a few weeks to reflect on the questions asked and talk with your priest and others. Then write thoughtful and honest responses. The more you do so, the more useful the document will be to you and others throughout the process.

After the Bishop reviews your application, he will decide whether to place you in the diocesan discernment process. If you are placed in the process, you will receive information on scheduling your medical, psychological and, if applicable, marriage evaluations. Assessment of these evaluations will be used as a part of the overall discernment process.

From the September following your admission to the process through April of the next year, you will participate in monthly discernment sessions with other Aspirants. These will include spiritual direction, theological study and reflection, and other exercises designed to help you and the diocese in discernment of ministry. The April meeting will consist of interviews with the Bishop and Commission on Ministry. After this meeting the Bishop, in consultation with the Commission on Ministry, will make decisions about the Aspirants’ admission to Postulancy and preparation for ministry. Full participation at the scheduled discernment sessions is expected.

Again, the prayers of many are with you as you begin this season of discernment.
The Diocese of Oklahoma

APPLICATION, PERSONAL HISTORY AND SELF-REFLECTION QUESTIONNAIRE FOR ADMISSION TO POSTULANCY FOR HOLY ORDERS

This application is submitted for the Order of Deacon____ Priest____ Bi-Vocational Priest____

This application and questionnaire is designed to provide each aspirant in the ordination process with a consistent, structured process of self-reflection. These questions ask for a wide range of autobiographical and self-descriptive responses. They are intended to stimulate your thinking in preparation for interviews with your psychological examiner, your medical examiner, your marital evaluator (if applicable), the Commission on Ministry, the Standing Committee, and the Bishop.

Realistically, this questionnaire requires a significant commitment of your time and energy. Please use it in a thoughtful and prayerful way as an additional tool for helping you discern God's leadings.

Please be honest with yourself in answering these often probing and challenging questions. Give yourself plenty of time to do the internal reflective work necessary. This is not the kind of work that can be properly done in one sitting. The application should be submitted using the format and outline below, typed using 12 point black, Times New Roman font; electronic submissions are welcome.

General Information

Full Name:
Address:
Telephone numbers and email address:
Date and place of birth:

Church Affiliation

Current Congregation (include mailing address and phone number):
How long have you been a member of this congregation?
Name of Rector, Vicar or Priest-in-Charge:
Date and Place of Baptism (include name and denomination of church and location)
Date and Place of Confirmation or Reception in to the Episcopal Church (include name and location of church):
Have you ever applied for the Holy Orders Process in the past?
If yes, please provide the dates, diocese, sponsoring congregation, and clergy, as well as a brief description of what happened.
**Education**

College/University (name, location): Degree received/Graduation date:
Graduate School/Professional School (name, location): Degree received/Graduation date:
Does your transcript reflect your current capacity for learning? List other educational experiences:
List principal extra-curricular activities in high school and college: List awards and/or other forms of recognition:
Is there anything else in your academic experience that would be helpful to the Commission on Ministry?

*(Please attach transcripts and proof of graduation from Universities attended)*

**Work History**

Current employer:
Write a brief account of your work history (up to 10 years):
Describe (a) type of work done; (b) time in each position; (c) reasons for change of jobs; (d) type of work enjoyed most and least; (e) list awards and other forms of recognition.
Military Experience? (Describe)
Is there anything else in your employment history of which the Commission on Ministry should be aware? Please elaborate.

**Family History**

Full name of spouse, if applicable: Spouse date and Place of Birth:
Spouse date and Place of Baptism (include name and denomination of church and location):
Spouse date and Place of Confirmation or Reception into the Episcopal Church (include name and location of church):
Date and Place of Marriage (if applicable):
*(include church or civic ceremony; denomination if applicable; was there pre-marriage preparation?)*
Have you ever been married before? Yes______No______
If “Yes,” using a separate sheet, provide details on the dissolution of the marriage. *(attach copy of dissolution and any orders pertaining to child support or alimony)* Describe your spouse and your relationship with him or her.
Describe the conversations you and your spouse have had regarding your pursuing ordained ministry.
What do you expect will be the impact on your family if you pursue ordination? What do you and your spouse look forward to as you pursue ordination?
Children: (list the name, age, gender of each child separately)

Describe your relationship with your children: (Provide answer for each child separately)

Family of Origin

Parents:

Father’s name, age: Father’s occupation:

Father’s religious affiliation: Mother’s name, age: Mother’s occupation: Mother’s religious affiliation: Parents’ marital status:

If applicable, briefly describe your parents’ feelings regarding your hopes to enter ordained ministry.

Siblings: (list the name, age, gender of each sibling separately) You were the ____ child.

Describe your family of origin.

Describe your relationship with your parents and siblings.

(Describe each relationship separately)

Have you ever been a victim of spiritual, emotional, sexual or physical abuse?

Financial Data

Current annual earnings: Salary:

Benefits: Total:

Spouse’s Salary: Spouse’s Benefits: Spouse’s Total:

Sources of other income:

Describe your current indebtedness. What is your net worth?

How much do you currently have in Savings and/or Investments?

If seminary will be part of your formation process, how much do you expect it to cost? How will you finance it?

Have you ever defaulted on a debt or filed for bankruptcy?

Is there anything else in your financial history of which the Commission on Ministry should be aware?

Medical History:

Please describe any medical and/or psychological issues of which the Commission on Ministry should be aware.

Have you ever been diagnosed, treated, or hospitalized for any psychological or psychiatric concerns?
Social and Recreational Activities/ Personal Accomplishments:

Other than English, what Language fluency, if any, do you possess? (indicate if spoken, reading, writing)
What social and recreational outlets do you have, and why are they important to you? What are your hobbies and interests?
What three books have you read lately?
Describe an accomplishment or activity that is significant to you outside of your church Experience:

Self Reflection/Spiritual Life

Spiritual Autobiography:
Attach to this document a spiritual autobiography (not more than 5 pages, single spaced), including significant events, people and things that have influenced how you see yourself as a person of faith.
Describe how you have felt drawn to the ordained ministry as a vocation, i.e.
When did you first entertain the idea?
What events and people have most influenced you? In what specific ways have you experienced this call? How have you seen your call confirmed?
How has your sense of call changed you?

Theological Reflection:
Who is a Biblical character with whom you can identify? Explain. When and how have you experienced God working in your life? How is God working in the world/church today?

Call to Ordained Ministry:
Elaborate on your perceived call to ordained ministry, addressing the following questions:
What is your understanding of Christian ministry?
How do you distinguish between the role of the laity and that of the ordained ministry? In light of your understanding of these roles, how are you suited to ordained ministry? To what specific forms of ordained ministry are you most drawn?
Why do you believe God is calling you to this particular ministry?
What personal barriers do you see for yourself in pursuing your ministry aspiration?
Have you ever felt wounded by your experience in the Church?
How might God use your gifts for God’s kingdom if you are not accepted as a Postulant for Holy Orders?

Spiritual Discipline:
Describe your current spiritual life and discipline.
Stewardship:

How do you decide what your annual giving will be to the church and other charitable needs? How do you care for yourself in the areas of exercise, rest, and recreation?

Leadership:

What qualities of leadership do you consider essential for someone in the ordained ministry? Describe what you consider to be your unique gifts of leadership.

How do you anticipate those gifts being expressed in the ordained Christian ministry? Describe your weaknesses or areas you feel you need to grow.

As a spiritual leader of a group of Christians, an ordained person has a great deal of power in individual people’s lives. Please write a brief reflection on this statement, and how you see yourself dealing with its implications.

Servanthood:

In what areas and roles have you been involved on a parish, diocesan, or community level? (Renewal, administration, program, teaching, pastoral, etc.)

How have you been a servant outside the confines of your parish life? What are the rewards for a Christian servant?

Conclusion:

What is your vision for yourself as an ordained person?

I understand that this document will be reviewed by those persons responsible for the diocesan discernment and formation process as well as to the medical and psychological evaluators used by the Diocese of Oklahoma to assist in the discernment process. By submitting this document to the Diocese of Oklahoma, I give my consent to such review.

Printed Name______________________________________________________

Signature__________________________________________________________

Date_________________________
Name of Applicant:

Social Security Number:

Permanent Address of Applicant:

Current Address of Applicant if Different from Above:

Telephone Numbers:

Today’s Date:

1. I am voluntarily seeking to become or am presently a candidate for postulancy, ordination, and/or other ministry position (referred to herein as my “application”) in The Episcopal Church through a process conducted by the Diocese of Oklahoma (“Diocese”). I understand that as a part of the Diocese’s decision making process about my application I am required to undergo a psychiatric and/or psychological assessment (“Assessment”) by a person or persons selected or approved by the Diocese.

2. I understand that the Assessment is only one part of the Diocese’s decision making process and that information provided to the Diocese about the Assessment may be considered with other information available to the Diocese in deciding whether or not to accept me or to continue considering my application for postulancy, ordination and/or other ministry position in the Diocese. Nonetheless, I understand that information from the Assessment may be determinative of the Diocese’s decision.

3. I voluntarily consent to participate in the Assessment and I agree to cooperate fully with the Assessment. I understand that the Assessment may include one or more attitude questionnaires, psychological tests, psychiatric tests, marital evaluations and/or clinical interviews. I understand that I will be asked to provide various types of information about myself which may include but not be limited to, information about my family, medical history, psychological and psychiatric history, criminal history, sexual behavior and attitudes, drug and alcohol use, relationships, education, and employment. I agree that all the information I provide for the Assessment will be true, correct, and complete, to the best of my knowledge. I understand that false or misleading statements made by me or significant omissions of any kind in the Assessment process are
sufficient cause for dismissal from the application process or denial of my application for a ministry position in the Diocese.

4. I authorize all mental health professionals involved in the Assessment to disclose to each other, both orally and in writing, all records and information, including opinions, pertaining to the Assessment, including but not limited to my responses to any questionnaires, tests and interview questions.

5. I understand that at the conclusion of the Assessment a written report may be prepared which will contain conclusions, opinions, observations, recommendations for follow-up and the like. I authorize the mental health professionals involved in the Assessment to disclose the written Assessment report to the Bishop or Ecclesiastical Authority of the Diocese. I authorize the Bishop or Ecclesiastical Authority to disclose to and discuss the written Assessment report with those involved in the application process. I authorize the mental health professionals involved in the Assessment to discuss the written Assessment report with the Bishop or Ecclesiastical Authority and those involved in the application process.

6. I understand and agree that whether or not I have paid for the Assessment or any part thereof, all of the records and documents related to the Assessment do not belong to me and I do not have the right to see them, have them reviewed by or sent to anyone else, or to receive a copy of them at any time. I further understand and agree that I am not entitled to discuss the Assessment with the personnel involved in the Assessment process nor am I entitled to have anyone else discuss the Assessment with them on my behalf. I agree that I will not request or seek to obtain from the Bishop or Ecclesiastical Authority or Diocese or from any of the personnel involved in the Assessment or from any other person or entity the originals or any copies of any records or documents related to the Assessment nor will I authorize anyone to do so on my behalf.

7. I understand that after the Assessment described herein, the Diocese may determine that further assessment is necessary before a decision is made on my application. If I elect to participate in such further assessment, all the terms of this Authorization and Release shall apply to any further assessment.

8. I understand and agree that the Diocese will have the right to control the use and disclosure of information regarding the Assessment both during consideration of my application and after consideration of my application has terminated, regardless of the action taken on my application, and that the Diocese does not have to obtain any further authorization from me to disclose any information regarding the Assessment or the written Assessment report.

9. I consent to the use of information that I provide or that is developed from the Assessment for research purposes, including but not limited to publication and presentation to the scientific or religious communities and/or other audiences, provided that if so used, the information will be presented in a disguised format to preclude identification of my individual identity.

10. As consideration for having my application considered by the Diocese, I hereby waive, release and discharge the Diocese and its officers, directors, employees, volunteers, agents and legal representatives, and all personnel and entities involved in conducting the Assessment and their
officers, directors, employees, volunteers, agents, heirs, administrators, successors, assigns and legal representatives (“the Released Parties”) from liability of all kinds including but not limited to personal injury, defamation, slander, libel, negligence, invasion of privacy, breach of contract, or otherwise, in law or in equity, arising out of my participation in the Assessment, use or disclosure of information regarding the Assessment, or arising in any other way as a result of the Assessment. I do not release the Released Parties from liability for willful or intentional acts or punitive damages.

11. I also agree not to sue or make a claim against the Released Parties for injury, damage, or loss of any kind sustained as a result of my participation in Assessment, the use or disclosure of information regarding the Assessment, or relating in any way to the Assessment. I will indemnify and hold harmless the Released Parties from all claims, judgments, and costs, including attorneys’ fees, incurred in connection with any such action.

12. I agree that if any portion of this Authorization and Release is found by a court to be unenforceable for any reason, the remainder of this Authorization and Release shall remain valid and in full force and effect.

13. I have carefully read this authorization and release and fully understand its contents. I sign it of my own free will. I understand that I may consult with an attorney of my choice before signing this document. I acknowledge that I have had the opportunity to ask questions concerning the contents of Authorization and Release and any such questions have been answered to my satisfaction. Nonetheless, in agreeing to sign this Authorization and Release, I have not relied upon any statements or explanations made by any of the Released Parties or by any attorney of any of the Released Parties. I have initialed each page of this Authorization and Release indicating that I have read and understand each paragraph.

__________________________________________  ____________________________
(Applicant’s Signature)  Date

__________________________________________
(Print or type Applicant’s name)

__________________________________________
(Witness’ Signature)

__________________________________________
(Print or type Witness’ Name)