



Anglican Diocese of the Western Gulf Coast  
 3333 So. Panther Creek Drive  
 The Woodlands, TX 77381

# APPLICATION for Diocesan Ministry

For (Please choose one)					
	Presbyter/Priest Track		Transfer of Orders		Licensure as Deacon
	Vocational Deacon Track		Licensure as Priest		Licensed Lay Ministry*
	Other, Please specify:				
Last Name		Legal First Name & MI		Preferred Name	
Street Address			City	State	Zip
Home Phone		Cell Phone		Work Phone	
Email Address				Social Security Number	
Date of Birth		Place of Birth		Nationality	
Name of Spouse (if applicable)			Date of Marriage (if applicable)		
Names of Child(ren)			Child(ren)'s Birthdate(s)		
Home Church Name			Church City and State		
Rector/Senior Pastor			Time Attending this Church		
Leisure Interests and Hobbies					

## OTHER QUESTIONS

Have you ever been divorced?	NO	YES	If YES please explain on a separate sheet, including date of official divorce.	
Have you been widowed?	NO	YES	If YES, please explain on a separate sheet.	
Are you a U.S. Citizen?	NO	YES		
If not a U.S. Citizen, are you authorized to work in the U.S.?	NO	YES		
Have you been convicted of a felony?	NO	YES	If YES, please explain on a separate sheet.	
Have you been Baptized?	NO	YES	Date/ Church:	
Have you been Confirmed by a Bishop?	NO	YES	Date/ Bishop:	
Have you been previously ordained?	NO	YES		
If yes, are you considered to be in good standing with that jurisdiction?	NO	YES	If NO, please explain on a separate sheet	
If applicable, please provide date of ordination, and the contact information for the Anglican jurisdiction or other church to which you are or were ordained:				
Have you ever sought ordination in any other Anglican jurisdiction or other church?			NO	YES
If Yes, which Anglican jurisdiction or other church?				
If Yes, what was the outcome of the inquiry or process? Attach a separate sheet if necessary.				
If Yes, please provide the contact information for the Anglican jurisdiction or other church.				

## MILITARY SERVICE

Branch	Rank at Discharge
Date of Service	Type of Discharge
If other than honorable discharge, please explain:	

## EDUCATION

Please list all undergraduate studies, beginning with the most recent. Add additional pages if necessary.

School	Did you Graduate?	Degree
Address	City, State	Zip
School	Did you Graduate?	Degree
Address	City, State	Zip
School	Did you Graduate?	Degree
Address	City, State	Zip
Present Indebtedness:		

## PERSONAL CHARACTER REFERENCES

Last Name	First Name	Relationship		
Street Address		City	State	Zip
Phone	Email	Church, Company, or Organization Name		

Last Name	First Name	Relationship		
Street Address		City	State	Zip
Phone	Email	Church, Company, or Organization Name		

Last Name	First Name	Relationship		
Street Address		City	State	Zip
Phone	Email	Church, Company, or Organization Name		

## EMPLOYMENT

Please list all employers for the past ten years, beginning with current or most recent. Add additional sheets if necessary.

Company or Organization	Job Title

Dates of Employment	Name of Supervisor	May we contact?
Address	Phone	Reason for Leaving

Company or Organization	Job Title	
Dates of Employment	Name of Supervisor	May we contact?
Address	Phone	Reason for Leaving

Company or Organization	Job Title	
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## FURTHER BACKGROUND INFORMATION

If your answer is YES to any of the questions below, please explain in detail on separate sheet.

1. Has disciplinary action of any sort ever been taken against you by a licensing board, professional association, ecclesiastical body, or educational or training institution? Have there been formal complaints against you that did not result in discipline? Are there complaints pending against you before any of the above-named bodies? Have you ever been disciplined or dismissed from a Christian congregation or denomination? Have you ever been denied or removed from an ordination or credentialing process with another Christian congregation or denomination?
2. Have you ever been asked to resign or been terminated by a training program or employer?
3. Have you ever had a civil suit brought against you relative to your professional work, or is any such action pending? Have you ever had professional malpractice insurance suspended or revoked for any reason?
4. Have you ever been charged with any ethics violations, or sexual harassment? Are any such actions pending against you?
5. Are you now or have you ever had sexual contact or attempted sexual contact (sexual intercourse of any kind, intentional touching, or conversation for the purpose of sexual arousal) with persons that you were/are seeing in any professional context (i.e., a parishioner, a client, a patient, an employee, a student)?
6. Since the age of 21, are you now or have you ever been engaged in sexual behavior (sexual intercourse of any kind, genital contact, intentional touching, or conversation for the purpose of sexual arousal) with persons under 18 years of age?
7. Are you now or have you ever been involved in the production, sale or distribution of pornographic materials?
8. Have you ever been charged, arrested, or convicted for any crimes or misdemeanors? Have you ever been charged with moving traffic violations? Has your driver's license ever been revoked or suspended?
9. Have you ever had a restraining order, injunction, order for protection or the like issued against you as a result of allegations of domestic violence, abuse or the like? Have you ever had your parental rights restricted, suspended or terminated or have any of your children ever been in foster care?
10. Have you ever misappropriated funds or otherwise breacher fiduciary duties in any professional capacity?

# INTEGRITY STATEMENT, RELEASE, & SIGNATURE

Please read carefully before signing

By signing this document:

I certify that my answers are true and complete to the best of my knowledge.

By signing below, I solemnly testify that I have been baptized in water in the name of the Father, and of the Son, and of the Holy Spirit as indicated above.

If this application leads to ordination, transfer, or some other status, I understand that false or misleading information in my application or interview(s) may result in my release and termination from the process and/or impaired or terminated status with the Anglican Diocese of the Western Gulf Coast.

I understand that the Bishop, Dean(s), and other administrative personnel may have access to the information provided as needed for the purpose of processing and discernment. I also acknowledge that the Anglican Diocese of the Western Gulf Coast is a constituent member Diocese of the Anglican Church in North America, and that the results of and a description of my discernment process may be shared as needed with other ACNA Bishops or Canons to the Ordinary (or other designated ordination leader).

I hereby authorize any person, company, church, and/or educational institution I have listed as a reference on my employment application to fully disclose in good faith any information they may have regarding my qualifications for employment, unless I have indicated "do not contact" and provided an explanation.

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Signature

Date

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Printed Name

*Note: If the application is completed electronically, please sign, scan and email this signature page to [sandy@dwgc.org](mailto:sandy@dwgc.org) or mail to:*

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