

Application for Holy Orders Form 2 – Nomination Forms

Directions for the Five Parts of Form 2

To be submitted by the PARISH:

- 2a) Parish Discernment Team Report** - The Parish Discernment Team (PDT) submits their report to the Priest-in-Charge. (The PDT Report Template is found to page 2)
- 2b) Vestry/Bishop’s Committee/Chapter Form 2 – Nomination of Aspirant** - If the PDT recommends the aspirant be considered for postulancy, the Priest-in-Charge has the Vestry/Bishop’s Committee/Chapter complete the Nomination of Aspirant Form 2 (page 3)
- 2c) Priest-in-Charge Confidential Letter of Recommendation-** After the approval of the PDT by Vestry and Priest-in-Charge, the Priest submits a sealed confidential letter of recommendation to the Bishop and COM. Please bear in mind that the Bishop and the Commission on Ministry understand the characteristics of a potential call to Holy Orders to be described in the Examinations from the liturgies for the Ordination of a Deacon & Ordination of a Priest which are found on page 531 & 538 in the Book of Common Prayer.

To be submitted by the ASPIRANT:

- 2d) Fee for the Psychological Evaluation & Oxford Background Check** - Please include a check or checks in the amount of \$1,000.00 to cover the cost of the canonically-required psychological evaluation and the Oxford Background Check. The Commission on Ministry recommends that these Fees be shared by the Aspirant and the Sponsoring Parish. Check/s should be payable to the Episcopal Diocese of Arizona with a Memo line notation “C.O.M. Fee: Psychological Evaluation/Oxford”. If the Aspirant and Parish require financial assistance, please attach check/s with partial payment and a letter requesting assistance for the remainder of the Fees.
- 2e) A Copy of the Aspirant’s Spiritual Autobiography** used in the PDT meetings.

Mail to:

The Rt. Rev. Jennifer A. Reddall
Bishop of Arizona & Commission on Ministry
114 West Roosevelt Street
Phoenix, AZ 85003-1406

**Application for Holy Orders
Part 1 - Parish Discernment Team Report**

Name of Aspirant: _____

Discerning For: ___Deacon ___ Priest ___ Lay ___ Unsure

Dates of Interviews: _____

Provide a brief review of pertinent questions and comments during the interview:

Please enumerate the characteristics/attributes of the aspirants that would be supportive of their continuing in the process toward becoming a postulant:

Please list any concerns that might lead the COM to decide either to delay or deny postulancy:

Please provide any other information that the PDT would like to share with the COM for their discernment regarding the aspirant:

PDT Recommendation to the priest-in-charge:

_____ The PDT discerned a call to Lay Ministry.

_____ The PDT discerned a call to Ordained Ministry as a Priest

_____ The PDT discerned a call to Ordained Ministry as a Deacon

_____ The PDT experienced a red flag.

Printed names and signatures of PDT members:

Chair of the PDT _____ Date _____

Application for Holy Orders
Form 2 – Vestry Form Part 2 – Nomination of Aspirant

To: **The Right Reverend Jennifer A. Reddall**
Bishop of Arizona & Commission on Ministry
114 West Roosevelt Street
Phoenix, AZ 85003 -1406

We, being a two-thirds majority of the whole Vestry/Bishop’s Committee/Chapter of _____ Congregation in _____, Arizona,

do hereby certify that _____ is a confirmed adult communicant in good standing of this Congregation. We have observed in this person a gift for calling others into a closer relationship with Christ and a deeper communion with one another. And, we do judge the applicant based on personal knowledge, to possess such qualifications as would be fitting for Nomination to Holy Orders as a potential ___Deacon ___Priest (*check one*).

We pledge financial support and encouragement in their preparation for ordination. *

[Print and Sign]

[Print and Sign]

Dated _____ Rector/Vicar/Dean _____

I hereby certify that the foregoing certificate was signed at a meeting of the Vestry/Bishop’s Committee/Chapter of

_____ Congregation, in _____, Arizona

duly convened at _____ on the ____ day of _____, 20____, and that the names attached are those of all (or two-thirds majority of all) the members of the Vestry/Bishop’s Committee/Chapter.

(Signed) _____
Clerk (or Secretary) of the Vestry/Bishop’s Committee/Chapter

Aspirant’s Acceptance of Nomination (signed) _____ Date _____

**** The Commission on Ministry recommends the costs of the psychological evaluation (\$800), the Oxford Background Check (\$200) and tuition for formation (local or residential as priest or deacon) be shared by the parish and the aspirant. If parish and aspirant require financial assistance, please attach a letter requesting assistance.***