



GUIDELINES FOR THE RECEPTION OF HOLY ORDERS

For Persons Ordained by
Churches in Historic Succession
[Not in Communion with this Church]

January 2022

THE EPISCOPAL CHURCH IN DELAWARE

Commission on Ministry
913 Wilson Road
Wilmington DE 19803-4012



COMMISSION ON MINISTRY

The Episcopal Church in Delaware

The Rt. Rev. Kevin S. Brown, Bishop

Greetings in Christ from the Commission on Ministry

We are grateful that you are responding to a call to serve God in The Episcopal Church in Delaware.

This document describes what happens in the process that leads from initial inquiry to the reception of your Orders. The shape of this process reflects the seriousness with which we take this process, and the great importance of the discernment needed to provide the Church with able and well-trained leaders, both lay and ordained.

The Episcopal tradition understands that a call to ordination comes in the context of the Christian community. Your participation in a Congregational Discernment Group process assures attention to clarifying your call to serve. The Commission on Ministry helps individuals use the resources of their faith and diocesan communities in discernment.

No document can tell you everything. We urge you to consult the persons who can support you as you begin to discover more clearly where God may be leading you.



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Guidelines for the Reception of Holy Orders for Persons Ordained in Churches in Historic Succession, but not in Communion with this Church

Title III, Canon 10 of the Canons of The Episcopal Church contains special provisions relating to individuals who have been ordained in other Churches. The guidelines in this section pertain to those who have been ordained to the Priesthood by bishops in churches in the historic succession but that are not in communion with The Episcopal Church, such as the Roman Catholic Church. These national canons and diocesan guidelines give the bishop oversight of the ordination process. What follows is a description of our customary practice. Individuals should bear in **mind that the various steps may be modified on occasion at the bishop's discretion.**

An individual seeking to be received into Holy Orders in The Episcopal Church:

- **Disengages from active priestly ministry.**
If not officially laicized, individual communicates with their superiors in existing church to clarify that he no longer wishes to function as a priest and is exploring priestly ministry in The Episcopal Church.
- **Is an active and confirmed/received member of a parish in The Episcopal Church in Delaware for at least 12 months.**
Individual may have been or be formally received into The Episcopal Church as a layperson by the bishop of this or another diocese. [See Book of Common Prayer requirements and canonical requirements]
- **Engages in meaningful conversation and discernment with a sponsoring priest [rector or priest in charge]**
The individual and priest discuss beginning congregational discernment. If laicized, then procedures for laypersons seeking holy orders are to be followed.
- **Meets with the Bishop.**
Sponsoring priest submits a letter to the bishop introducing the individual and describing conversations of discernment prior to this meeting. If the bishop determines that the individual should proceed, a Congregational Discernment Group (CDG) is appointed by the sponsoring priest in consultation with the Commission. The bishop shall also assign a mentoring priest with whom the individual meets regularly for guidance, information, and dialogue about ministry in The Episcopal Church.
- **Participates in a Congregational Discernment Group (CDG)**
The task of this CDG is to address with the individual reasons for having left the ordained ministry in the previous church, the reasons for wanting to serve as an Episcopal priest, and the differences in ministry between the two churches. Together they explore whether the individual has shown the qualities and aptitude needed for the priesthood in The Episcopal Church. CDG submits a report to the vestry and Commission via the Commission Chair (Sponsoring Priest copied). Appendix 1



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- Vestry endorses individual, Appendix 2
- Sponsoring priest attests to the action of the vestry, Appendix 2
- **Completes** required forms and essays & provides documentation, as requested on the application, and in addition, addressing reasons for seeking to enter Holy Orders in The Episcopal Church, Appendices 3, 4, 5, and 6
- **Completes (1) physical evaluation; (2) psychological evaluation; and (3) background check.** [See diocesan website – Holy Orders; consult bishop’s executive assistant]
- **Provides for the submission of certification from at least two Episcopal priests. [Priests Certification, Appendix 7]**
Those certifying state that, from personal examination or review, they believe that the individual’s departure from the Communion to which he (she) has belonged did not arise from any moral or religious character, or on account of which it may be best not to be admitted to Holy Orders in The Episcopal Church.

At this point, the Commission on Ministry shall,

- **Upon the individual’s submission of required documentation, interview the individual** (may be more than one such interview) and makes a recommendation to the bishop.
- **Determine whether the individual has had adequate theological education in the previous Church. At an appropriate time, the individual shall be examined by the Commission* and show proficiency in the following** [Canon 10.3c],
 - (1) Church History: the history of the Anglican Communion and The Episcopal Church.
 - (2) Doctrine: the Church’s teaching as set forth in the Creeds and in an Outline of the Faith, commonly called the Catechism.
 - (3) Liturgics: the principles and history of Anglican worship; the contents of the Book of Common Prayer.
 - (4) Practical Theology: (i) The office and work of a deacon and priest in this Church; (ii) The conduct of public worship; (iii) The Constitution and Canons of The Episcopal Church and of the diocese in which the applicant is resident; and (iv) The use of voice in reading and speaking.
 - (5) The points of doctrine, discipline, polity, and worship in which the Church from which the applicant has come differ from this Church.
- * The Commission on Ministry or its representatives shall examine the individual for proficiency in the above-listed areas and submit to the Standing Committee and bishop a statement affirming competence.

This portion of the examinations shall be conducted, in part at least, by written questions and answers, and the replies kept on file for at least 3 years.

The Commission may, with the consent of the bishop, and with notice to the applicant, examine the latter in any other subject required by Canon III.6.5 (f) and (g) or III.8.5 (g) and (h).



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A preferred method of education for these areas would be a one-academic-year program resulting in a certificate or diploma of Anglican studies from an Episcopal seminary or other seminary approved by the bishop. Alternatives such as a combination of online or local seminary classes, mentoring, and prescribed reading may be approved by the bishop in consultation with the Commission on Ministry.

The individual now,

- **Submit [to the executive assistant to the bishop with a copy to the chair of the Commission] evidence of having completed educational programs including:**
Prevention of sexual misconduct; civil requirements for reporting and pastoral; opportunities for responding to evidence of abuse; the Constitution and Canons of The Episcopal Church, particularly Title IV thereof; training regarding the Church's teaching on racism (anti-bias & anti-racism) and diocesan canons.
- **Receives certification from the bishop and Standing Committee that the individual is accepted as a member of the clergy of this Church [bishop and Standing Committee Certification Appendices 8 and 9]** subject to the successful completion of the examinations specified in [Canon III.10.3 (c), (di)]. Individuals shall not be received less than 12 months from the date of having become a confirmed communicant of this Church [Canon III.10.3 (l)] and six months after the certificates have been received.

It follows that,

- **Standing Committee and Bishop consent to the reception of individual's Orders into The Episcopal Church.** [Canon III.10.3 (g)] [the bishop and Standing Committee Consent Appendices 10]
The individual is interviewed by the bishop and Standing Committee.
- **Before the reception, the bishop requires the individual to sign a Declaration of Conformity.** [Canon III.10.3 (dii)] Prior to being received into Holy Orders in this Church, the bishop shall require a promise in writing [Attestation, Appendix 11] to submit in all things, to the discipline of this Church without recourse to any other ecclesiastical jurisdiction or foreign civil jurisdiction, and shall also require the individual to subscribe and make in the presence of the bishop and two or more Presbyters the declaration required in Article VIII of the Constitution, as follows in the Ordination Registry:

"I do believe the Holy Scriptures of the Old and New Testaments to be the Word of God, and to contain all things necessary to salvation; and I do solemnly engage to conform to the doctrine, discipline, and worship of The Episcopal Church."

- **Bishop receives into The Episcopal Church the Orders of the priest already ordained by a bishop in the historic succession.** [Canon III.10.3 (g)]

In the case of an ordination under this Canon, the bishop shall, at the time of such ordination, read this preface to the Service:



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The Ecclesiastical Authority of this diocese is satisfied that A.B. accepts the doctrine, discipline, and worship of this Church and now desires to be ordained a deacon (or ordained a priest) in this Church. We are about to confer upon A.B. the grace and authority of Holy Orders as this Church has received them and requires them for the exercise of the ministry of a deacon (or a priest).

The certificates of ordination in such cases shall contain the words,

Acknowledging the ministry which A.B. has already received and hereby adding to that commission the grace and authority of Holy Orders as understood and required by this Church for the exercise of the ministry of a deacon (or a priest).

- **In consultation with the Commission on Ministry, the bishop assigns a mentor priest to meet with the priest whose orders have been received.**

The mentor and newly received priest shall meet regularly for guidance, information, and sustained dialogue about ministry in The Episcopal Church.

Please note regarding the use of forms: The essence of any form is as good as the content; problems with format should give way to the accuracy and thoroughness of content.



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Appendix I: REPORT OF THE CONGREGATIONAL DISCERNMENT GROUP (CDG) TO THE COMMISSION

Name of Aspirant	_____	
Report Date	_____	
Starting Date of CDG	_____	
Ending Date of CDG	_____	
Sponsoring Congregation	_____	City _____
Convenor's Name	_____	
Convenor's Cell Telephone	_____	Other _____
Convenor's Email	_____	
Sponsoring Priest Name	_____	
Cell Telephone	_____	
Office Telephone	_____	
Email	_____	

The evaluation of the Aspirant by the Congregational Discernment Group is summed up in the questions below, and in any other thoughts, the group may wish to provide. (Please provide answers on a separate sheet.)

1. Does this person strike you as one who is grounded and growing in the Christian faith?
2. How would you characterize this person's sense of the Christian life and habits of prayer and spiritual depth?
3. How does this person understand their decision to leave the ordained ministry in the church previously served?
4. What is this person's understanding of Priestly ministry in The Episcopal Church?
5. How does this person express their intent and desire to be an Episcopal priest?
6. What is this person's vision of their service in the Church; to what specific ministry do they believe they are called?
7. Describe this person's capacity for leadership. How has this person displayed their leadership in the past, and in the parish and/or diocese? What are this person's strengths and weaknesses?
8. Does this person strike you as capable of healthy ministry and leadership? Were there any notable concerns or reservations expressed by a member of the group?



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9. Does this person strike you as capable of healthy ministry and leadership? Were there any notable concerns or reservations expressed by a member of the group?
10. In what areas does this person need particular care and guidance for further growth?
11. What standards/boundaries has this person established to guide ethical behavior, generally?

We, the undersigned, as members of the Congregational Discernment Group (CDG), recommend to the Commission on Ministry that (Name) _____ continue to discern their call to Holy Orders in The Episcopal Church in Delaware under the Commission on Ministry.

CONGREGATIONAL DISCERNMENT GROUP

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Submitted by:

_____	_____	_____
<i>Signature of CDG Chair</i>	<i>Printed Name of CDG Chair</i>	<i>Date</i>

Approved by:

_____	_____	_____
<i>Signature of Rector/Sponsoring Priest</i>	<i>Printed Name of Rector/Sponsoring Priest</i>	<i>Date</i>

Completed original forms should be submitted to:

The Episcopal Church in Delaware
Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

Copies scanned/sent/mailed to Chair, Commission on Ministry, com@delaware.church



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Appendix II: VESTRY ENDORSEMENT FOR ORDINATION TO THE PRIESTHOOD

*To the Rt. Rev. Kevin S. Brown, Bishop and
Commission on Ministry and the Standing Committee of
The Episcopal Church in Delaware*

Date _____

We, whose names are hereunder written as duly elected members of the vestry of (*print name of the congregation*) _____ do certify and believe that (*print name of deacon*) the Reverend _____, since the _____ day of _____ in the year _____, being the date of his/her/their ordination to the Diaconate, hath lived a sober, honest, and godly life and hath not written, taught, or held anything contrary to the doctrine, discipline, or worship of this Church, and we think he/she/they is a person worthy to be admitted to the **SACRED ORDER OF PRIESTS**.

VESTRY SIGNATURES

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Must be signed by a two-thirds majority of the members of the vestry.)



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Appendix II: Attestation of the Foregoing Certificate

I HEREBY certify that the foregoing certificate was signed at a meeting of the vestry of (*print name of the congregation*) _____, duly convened in the city of (*city name*) _____ on (*date*) _____ and that the signatures shown are those of a two-thirds majority of the members of the vestry.

Signed _____
(*Clerk of the Vestry*)

I HEREBY certify that I am personally acquainted with (*print name of deacon*) *The Reverend* _____ and that I believe him/her/them to be well qualified to be made Office of Priest, to the glory of God and the edification of the Church.

Signed _____
(*Rector/Sponsoring Priest of the congregation to which the deacon belongs*)

Note: Should the congregation be without a Rector/Sponsoring Priest, it shall suffice that in his/her/their place the certificate from the vestry be signed by some presbyter of the diocese (sponsoring priest) in good standing to whom the postulant is personally known, the reason for the substitution being stated in the attesting clause.



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Appendix III: Application for Reception of Holy Orders Title III, Canon 10, Section 3 (a)

I, _____, a communicant in good standing of
_____ parish, having previously been ordained as a priest
in the _____ Church, hereby apply to be received as a priest in The
Episcopal Church. I have attached all the information required by The Episcopal Church of Delaware
as outlined in the Guidelines for Reception of Clergy from other Churches.

Name (*printed*)

Signature

Date

Completed original forms should be submitted to:

The Episcopal Church in Delaware
Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

Copies scanned/sent/emailed to Chair, Commission on Ministry, com@delaware.church



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Appendix IV: Application for Discernment of Holy Orders

Date of Application _____

Full Name (including maiden) _____

Preferred Pronouns _____

(Please include a headshot photograph.)

Clergy Order that Applicant is Seeking _____ Permanent Deacon; _____ Priest

Have you previously applied for admission to Holy Orders? _____ Y _____ N

If so, when/where _____

and to whom _____

Applicant's Address _____

Email _____

Cell Telephone _____

Home Telephone _____

Date of Birth _____

As applicable Martial Status _____ Ever Divorced? _____ Number or Marriages _____

Spouse's Name _____

Spouse's Telephone _____

Name(s) and Age(s) of Child(ren) _____

CHURCH MEMBERSHIP

Sponsoring Congregation _____

City, State _____

Rector/Priest _____

Rector/Priest Cell Telephone _____

Rector/Priest Office Telephone _____

Rector/Priest Email _____

Have you been a confirmed member in good standing at a congregation within the Episcopal Church in Delaware?

_____ Y _____ N



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BAPTISM *(Please provide documentation if you have not already.)*

Date _____

Name of Church _____

City, State _____

Denomination _____

Officiant's Name _____

CONFIRMATION *(Please provide documentation if you have not already.)*

Date _____

Name of Church _____

City, State _____

Denomination _____

Officiant's Name _____

EDUCATION

	Name of School	Location	Major / Degree	Dates you Attended
High School				
College*				
Business or Trade School*				
Seminary &/or Post-Graduate Work*				

* Please request official transcripts to be sent to the Episcopal Church in Delaware at the address shown at the end of this form.



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WORK EXPERIENCE *(List the last two paid positions you have held or the two most relevant to the ministry.)*

Employer _____

Address _____

Supervisor's Name _____

Telephone _____

Email Address _____

Dates Employed _____

Describe the job you held and the duties you performed.

Employer _____

Address _____

Supervisor's Name _____

Telephone _____

Email Address _____

Dates Employed _____

Describe the job you held and the duties you performed.



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Essays

Please provide typed responses for each of the subjects below. Each essay should be no more than five pages, single-spaced, and in 12-point font. Label each essay with the essay's title and your name.

I. Autobiography

Your autobiography should cover the most important aspects of your spiritual, emotional, and professional development. While this essay gives you great latitude, it should include the following elements: the facts of your life that inform your calling to ordained ministry, the circumstances around you becoming a Christian, consideration of times of growth and change (including, if applicable, details of any counseling you have undertaken), any experience you have had participating in religions other than Christianity, and an honest discussion of your personal strengths and weaknesses.

II. Marriage

If you are married, write an essay on your understanding of marriage and how that understanding is reflected in your current relationship. The statement should include a frank evaluation of the anticipated impact of ordained ministry on your relationship. If you are divorced, include information on the circumstances of your marriage, divorce, ecclesiastical judgment, and remarriage (if any). You should also include a statement on what you have learned from the experience of your divorce.

III. Livelihood and Occupational History

Describe your current job or other working situation, including a description of your economic base. You need not give income figures but do mention how you support yourself and your family. List in reverse chronological order all the jobs you have held since college or in the last ten years (whichever is less), your duties on these jobs with particular attention to leadership roles, and your reasons for taking and leaving them. Please note that a resume does not adequately fulfill this requirement.

IV. Parish Ministry

Describe your current involvement in ministry at your parish. Note leadership roles you have had, key lessons learned in ministry, and what you took away from times of conflict.

V. Vocational Identity

Summarize your understanding of the diaconate and/or priesthood, noting the differences between them, and your own reasons for feeling called to the order sought.



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Short Responses (*each response should be no more than five paragraphs*)

- I. What does it mean to find salvation in Jesus Christ?
- II. What does it mean to be under authority?
- III. What is the Gospel?
- IV. How do you share your faith?
- V. What is your rule of life?
- VI. Define stewardship and describe how you meet this definition.

Submitted by:

Signature of Applicant

Printed Name of Applicant

Date

Approved by:

Signature of Rector/Sponsoring Priest

Printed Name of Rector/Sponsoring Priest

Date

Completed original forms should be submitted to:

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Appendix V: Authorization to Release Information, Release of Claims, and Indemnity and Hold Harmless Agreement (Referred to herein as “Authorization and Release”)

Name of Applicant _____

Date _____

Permanent Address of Applicant _____

Current Address of Applicant _____
(if different) _____

Applicant’s Cell Telephone _____

Applicant’s Email _____

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 Episcopal Church in Delaware. 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 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, 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.

Applicant’s Initials _____



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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 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 I have paid for the Assessment or any part thereof, all 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.

Applicant's Initials _____



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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 because 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 because of my participation in the 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 Initials _____



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Submitted by:

Signature of Applicant

Printed Name of Applicant

Date

Witnessed by:

Signature of Witness

Printed Name of Witness

Date

Completed original forms should be submitted to:

The Episcopal Church in Delaware
Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

Copies scanned/sent/emailed to Chair, Commission on Ministry, com@delaware.church



COMMISSION ON MINISTRY

Appendix VI: For Release of Information to Applicant Only **Authorization to Release Information, Release of Claims, and Indemnity and** **Hold Harmless Agreement** *(Referred to herein as “Authorization and Release”)*

Name of Applicant _____

Date _____

Permanent Address of Applicant _____

Current Address of Applicant _____
(if different) _____

Applicant's Cell Telephone _____

Applicant's Email _____

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 Episcopal Church in Delaware. 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 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, 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.

Applicant's Initials _____



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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. If deemed necessary by a mental health professional, I agree to document my authorization in a form that satisfies the requirements of applicable law.
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 me. I understand that I may choose whether to provide a copy of the written Assessment report to the diocese. If I provide a copy to the diocese, I authorize the mental health professionals involved in the Assessment to discuss the written Assessment report with a person or persons designated by the diocese, and I agree to execute the written authorization form attached hereto as Appendix A (or a similar written authorization form approved by the mental health professional(s)) to approve this discussion. I agree that I will not disclose the written Assessment report to anyone other than the diocese.
6. Except for my right to receive a copy of the written Assessment report as specifically provided in paragraph 5 above, 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, except to the extent that my rights with respect to records held by the mental health professional(s) are preserved by applicable law, I do not have the right to see any records or documents related to the Assessment, to 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 diocese or from any of the personnel involved in the Assessment or, except to the extent that my rights with respect to records held by the mental health professional(s) are preserved by applicable law, 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 if I choose to provide a copy of the written Assessment report to the diocese pursuant to paragraph 5 above, 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.

Applicant's Initials _____



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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 and deidentified 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 or breach 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 because of my participation in the 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 Initials _____



COMMISSION ON MINISTRY

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Submitted by:

Signature of Applicant

Printed Name of Applicant

Date

Witnessed by:

Signature of Witness

Printed Name of Witness

Date

Completed original forms should be submitted to:

The Episcopal Church in Delaware
Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

Copies scanned/sent/emailed to Chair, Commission on Ministry, com@delaware.church



COMMISSION ON MINISTRY

Appendix VII: Certificate of Moral and Religious Character Title III, Canon 10, Section 3 (a) (5)

I, _____, an Episcopal priest in good standing in the Episcopal Diocese of _____, hereby state that, from personal examination or from satisfactory evidence presented to me, the departure of _____ from the Communion to which this person has belonged has not arisen from any circumstance unfavorable to moral or religious character, or on account of which it may not be expedient to admit the person to Holy Orders in this Church.

Name (*printed*)

Signature

Date

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913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

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COMMISSION ON MINISTRY

Appendix VIII: Certificate of Acceptability, Bishop Title III, Canon 10, Section 3 (di)

I, the Rt. Rev. Kevin S. Brown, hereby declare that I find _____,
desiring to be received as a priest in The Episcopal Church, acceptable as a priest of this Church,
subject to the successful completion of the examination of their proficiency as provided in Title III,
Canon 10, Section 3 (c) and (d).

In witness whereof, I have hereunto set my hand this _____ day of _____,
in the year of our Lord 20____.

Name (*printed*)

Signature

Completed original forms should be submitted to:

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Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

Copies scanned/sent/mailed to Chair, Commission on Ministry, com@delaware.church



COMMISSION ON MINISTRY

Appendix IX: Certificate of Acceptability, Standing Committee Title III, Canon 10, Section 3 (di)

To: The Rt. Rev. Kevin S. Brown, Bishop of the Episcopal Church in Delaware

We, the Standing Committee of the Episcopal Church in Delaware, having been duly convened at

_____, do testify that we find, _____

desiring to be received as a priest in The Episcopal Church, acceptable as a priest of this Church,
subject to the successful completion of the examination of their proficiency as provided in Title III,
Canon 10, Section 3 (c) and (d).

In witness whereof, we have hereunto set our hands this _____ day of _____, in
the year of our Lord 20____.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Members of the Standing Committee)

Completed original forms should be submitted to:

The Episcopal Church in Delaware
Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

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COMMISSION ON MINISTRY

Appendix X: Advice and Consent of Standing Committee Title III, Canon 10, Section 3 (g) (1)

To: The Rt. Rev. Kevin S. Brown, Bishop of the Episcopal Church in Delaware

We, the Standing Committee of the Episcopal Church in Delaware, having been duly convened at _____, do testify that we give our advice and consent to your receiving the Holy Orders of _____.

In witness whereof, we have hereunto set our hands this _____ day of _____, in the year of our Lord 20____.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Members of the Standing Committee)

Completed original forms should be submitted to:

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Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

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COMMISSION ON MINISTRY

Appendix XI: Attestation Concerning Vows or Engagements **Title III, Canon 10, Section 3 (a) (3)**

I do hereby attest that I am free from any vows to any other ecclesiastical jurisdiction or foreign civil jurisdiction or other engagements that are inconsistent with the exercise of Holy Orders in The Episcopal Church.

Print Name

Signature

Date

Completed original forms should be submitted to:

The Episcopal Church in Delaware
Attention: Executive Assistant to the Bishop
913 Wilson Road
Wilmington, DE 19803-4012
(302) 256-0374 | www.delaware.church

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