# Discernment Process Application

**Title, First Name, Middle Initial, Last Name**: Click here to enter text.

**Email:** Click here to enter text.

**Address (street, city, state, zip code):** Click here to enter text.

**Primary Phone Number:** Click here to enter text.

**Birthdate:** Click here to enter text.

**Sex:** Click here to enter text.

**Are you a citizen of the USA?** yes no

**Social Security Number:** Click here to enter text.

**Present Congregation Affiliation (name and city):** Click here to enter text.

**Length of time affiliated with congregation:** Click here to enter text.

**Name of sponsoring priest:** Click here to enter text.

**Sponsoring priest phone number:** Click here to enter text.

**Baptized (date, denomination, name and city of congregation):** Click here to enter text.

**Confirmed/Received (date, name and city of congregation):** Click here to enter text.

**Length of time in residence in the Episcopal Diocese of Central New York:** Click here to enter text.

**Please list where you have gone to college, year of graduation(s)/completion(s), and what undergraduate and or graduate degree(s) were earned (attach to this application if necessary):**

Click here to enter text.

**Present Occupation/Employer (job title and mailing address):**

Click here to enter text.

**How long employed with present employer:** Click here to enter text.

**Previous Occupation/Employer (job title and mailing address):**

Click here to enter text.

**How long employed with previous employer:** Click here to enter text.

**Current Marital Status:** single married separated widowed divorced

**If married, name of spouse:** Click here to enter text.

**Date married:** Click here to enter text.

**Please give date if separated, widowed, or divorced**: Click here to enter text.

**If married, divorced, widowed more than once, please list separately name(s) and date(s):** Click here to enter text.

**Children: Provide name and age of each child:**

Click here to enter text.

**Have you ever been arrested for a misdemeanor or felony?** yes no

**If so, please describe/explain:** Click here to enter text.

**Have you ever been convicted of a misdemeanor or felony?** yes no

**If so, please describe/explain:** Click here to enter text.

**Have you ever been treated for any alcohol or drug addiction?** yes no

**If so, when and where, explain:** Click here to enter text.

**Have you ever participated in another discernment process for ordination in a different Christian denomination?** yes no

**If so, please describe/explain:** Click here to enter text.

**Have you ever participated in another discernment process for ordination in this diocese or any other diocese of the Episcopal Church?** yes no

**If so, please explain and include dates:** Click here to enter text.

**Were you ordained and did you serve in a capacity as an ordained minister in a different denomination?** yes no

**If so, please explain and include dates:** Click here to enter text.

**Please include names, contact information, phone number, email, and relationship for two personal references, who could be contacted by us:**

1. Click here to enter text.
2. Click here to enter text.

**Please include the names, contact information, phone number, email, and relationship for two professional references, who could be contacted by us:**

1. Click here to enter text.
2. Click here to enter text.

**I attest that I have answered all the above information truthfully and have not falsified any information. I also authorize the Episcopal Diocese of Central New York to call references and do a criminal background check to verify the above information.**

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Signature Date

When complete: print form, sign, date, and mail to:

The Diocese of Central New York

Attn: Discernment Committee

1020 7th North Street

Suite 200

Liverpool, NY 13088