

**Form 2: Application for Ministry Discernment Conference
Diocese of El Camino Real**

_____ Name _____ Application Date _____

Social Security Number: _____

Telephone Number, Daytime: _____

Evening: _____

Mobile: _____

Email Address: _____

Current Address _____

City, State ZIP Code _____

Permanent Address ²³ _____

City, State ZIP Code _____

_____ Date of Birth _____ Place of Birth _____ Gender _____

How many years have you resided in the Diocese of El Camino Real? _____
If fewer than two years, use a separate page as Attachment A to describe
why you relocated.

What is your Parish Church? _____

When did you become a Communicant in your Parish? _____

²³ Enter this information only if it is different from your Current Address.

What is the name of the high school you attended? _____

Where is it located? _____

Are you currently matriculating in an educational institution? Yes No

What is its name? _____

Where is it located? _____

Are you matriculating full time part-time on a leave of absence?

On a separate page as Attachment B, please provide the following information on each college or university you have attended, in reverse chronological order:

- Name and Location
- Degree obtained. Please indicate any honors.
- Dates attended.
- Grade Point Average or Letter Grade followed by its scale²⁴.

List your extra-curricular activities on a separate page as Attachment C and indicate whether you participated in high school, college or university, or both. Indicate any leadership position you held.

What is your total number of years of education beyond high school?

--

College or University:

--

Graduate School:

--

Professional or Technical

--

What is your work history?

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

 Never gainfully employed.
Currently employed part-time.
Currently employed full time.
Volunteer.
Not presently employed.

Using a separate page as Attachment D, write a brief chronological account of your work history in reverse chronological order. Please describe any gaps in your work activity. Please include:

- the name of your employer,
- a brief description of your activity, including any leadership position you held
- when you began, ended, and the time on each job,
- the reason for the job change

²⁴ For example, use: 3.9/4.0; or B+ / A, B, C, D, F.

- what you liked best about this job
- what you liked least about this job

Using a separate page as Attachment E, please describe your free-time activities. How often and how long did you engage in each one?

Using a separate page as Attachment F, please identify and describe the civic or social clubs of which you are or have been a member:

- Name
- Activity
- When did you participate, and how frequently?
- Did you hold any leadership positions?

Using a separate page as Attachment G, please describe the volunteer community service activities, including military reserve or public service reserve, in which you participate:

- Name
- Activity
- When did you participate, and how frequently?
- Did you hold any leadership positions?

What is your present marital status?

Single Married Widowed Divorced Separated Partnered

How many marriages or partners have you had?

Never married or partnered Once Twice Three or more times.

What is the name of your current spouse or partner?

_____ Began: _____

List your children:

Name:	Date of Birth:	Gender:	Living?

Financial: How do you intend to support yourself and your dependents during your education and training for ordination? Please indicate all those that apply:

- | | | |
|---|---|---|
| <input type="checkbox"/> Full time employment | <input type="checkbox"/> Part-time employment | <input type="checkbox"/> Spouse to work |
| <input type="checkbox"/> Personal Savings | <input type="checkbox"/> Scholarship | <input type="checkbox"/> Student loan |
| <input type="checkbox"/> Support from Parish | <input type="checkbox"/> Support from Diocese | <input type="checkbox"/> Gifts |
| <input type="checkbox"/> Help from Family | <input type="checkbox"/> Other. Please indicate on a separate page as Attachment H. | |

Do you have any large debts? _____. If needed use a separate page also as Attachment H.

Your parents: Please give their address if different from yours, and if not deceased.

Father's Name _____
Address _____
City, State, ZIP Code _____

Mother's Name: _____
Address _____
City, State, ZIP Code _____

What is the marital status of your parents?

- | | | |
|--|--|--|
| <input type="checkbox"/> Marriage intact | <input type="checkbox"/> Father deceased | <input type="checkbox"/> Mother deceased |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Separated | <input type="checkbox"/> Both deceased |

If your parents' marriage ended by separation, divorce, or death, how old were you when this occurred: _____

If either of your parents married again, how old were you when this occurred:

Mother: _____ Father: _____

What is the religious preference of your mother _____, and your father _____?

Siblings: Include and identify yourself and give, in order from oldest to youngest, this information for all of your brothers and sisters:

Name	Date of Birth	Gender	Living?

On a separate page as Attachment I, list the books you have read in the last six months.

On a separate page as Attachment J, list the web sites, entertainment and movies, newspapers, magazines and other periodicals you have read, attended, or used regularly in the past six months.

Include a letter from your spouse or partner regarding your interest in the ordained ministry and their expectations as Attachment K.

Who are three persons with whom you have worked in the Church?

Name ²⁵	Shared Ministry	Telephone	Email

On a separate page as attachment L, briefly (not more than two pages for each question) answer the following questions: a. Describe the vocation(s) in which you are now actively involved. b. Discuss how the ordained ministry is similar to and distinct from the ministry of all God’s people. c. Please make a list of statements that complete the sentence: “I feel called to be ordained as a _____ (deacon or priest) so that...

Signature Date

Applicant’s Attachment Check List:

- | | | |
|----------|----------|----------|
| | E | I |
| B | F | J |
| C | G | K |
| D | H | L |

²⁵ These persons should **not** be those you have listed as references on Form 12.