

The Episcopal Diocese of Georgia

License to Officiate

ORDER OF MINISTRY	FIRST NAME	FULL MIDDLE NAME	LAST NAME
NICKNAME (IF APPLICABLE)			
ADDRESS STREET/POB	CITY	STATE	ZIP
ADDITIONAL ADDRESS IF ABOVE LESS THAN FIVE YEARS	CITY	STATE	ZIP
CELL	HOME PHONE	E-MAIL	
DRIVER'S LICENSE NUMBER	STATE OF LICENSE	SOCIAL SECURITY NUMBER	
DATE OF BIRTH	PLACE OF BIRTH	MARITAL STATUS (NEVER MARRIED/MARRIED/SEPARATED/DIVORCED/WIDOWED)	

Educational background: list colleges and universities

Name of College/University/Seminary	Years studied (from/to)	Major Subjects	Degree Attained

Where applicable, please complete the information below for our records

SPOUSE'S NAME (FIRST & LAST)	WEDDING ANNIVERSARY
CHILD'S NAME	AGE
CHILD'S NAME	AGE
CHILD'S NAME	AGE
CHILD'S NAME	AGE

Date of ordination as a deacon _____ in the Diocese of _____

Date of ordination as a priest _____ in the Diocese of _____

Canonically resident in the Diocese of _____ since _____

Most recent congregations served (or list non-parochial work if applicable)

Name of congregation, location (or non-parochial position)	Diocese	Position Title	Years served (from/to)

Are you currently retired with Church Pension Fund? Yes No If yes, retirement date: _____.

Answer all of the following. If you answer yes to any of the questions below, please explain on an additional sheet of paper.

Have you been convicted for any crimes or misdemeanors? Yes No

Have you even been charged with child abuse, child neglect or sexual misconduct? Yes No

Have you ever been accused of financial misconduct in your employment? Yes No

Other than the above items, is there any other fact or circumstance involving you or your background that would call into question your being entrusted with the care, guidance, and supervision of people placed in your charge?
 Yes No

Steps required for licensure (for diocesan office use)

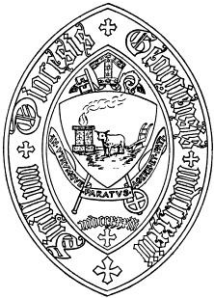
Date/Staff Initials	List of Requirement
	Meeting with the Bishop prior to issuing a first license. <i>Additional meeting not required for renewals.</i>
	Letter of good standing from Diocese of canonical residence. <i>New letter required for renewals only every third year.</i>
	Background check completed for those whose diocese of canonical residence does not have a check within the past 3 years and for those who will serve as the head of a congregation. <i>New background check required every fifth year.</i>
	Safe-church training (valid for five years)
	Anti-racism training. One-time training required.
	Annual report. <i>Due by July 1 for all renewal applications.</i>

Please sign that you authorize the Diocese of Georgia to complete a new background check on you using the information supplied above if the diocese where you are canonically resident does not have a check less than three years old, or if you will serve as a priest in charge of a congregation:

Signature of applicant

Date

Complete, sign and mail to The Rev. Canon Frank Logue, Episcopal Diocese of Georgia, 611 East Bay Street, Savannah, GA 31401. Or scan and send as a PDF to flogue@gaepiscopal.org



The Episcopal Diocese of Georgia

Annual Report for Non-Parochial Priests

FIRST NAME	FULL MIIDDLE NAME	LAST NAME	NICKNAME (IF APPLICABLE)

DIOCESE OF CANONICAL RESIDENCE	STATUS AS PRIEST (ACTIVE NON-PAROCHIAL OR RETIRED)

Briefly describe your ministry in the past 12 months listing congregations served and characterizing your ministry in those congregations, or list causes/reasons which prevented exercise of the same.

In the coming year, I am interested in

- Supply work
- Interim Ministry
- Part-time work in a parish or mission
- Nothing beyond present responsibilities

For the above, I can travel approximately _____ miles.

Signature of applicant

Date

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