

Diocese of Western Anglicans  
Clergy Formation Process  
Vocational Deacon Application Packet



# DIOCESE OF WESTERN ANGLICANS

## Vocational Deacon Application Packet

Please complete all portions for which you are responsible. Then email the packet to the emails listed below for your Deanery and include the two emails listed under the Diocese.

### Arizona Deanery Email Addresses:

Dean: [pforbes5@gmail.com](mailto:pforbes5@gmail.com)

CFT:

### Los Angeles Deanery Addresses:

Dean: [rob@stlukesanglican.org](mailto:rob@stlukesanglican.org)

CFT: [pastor.joyce.brooks@gmail.com](mailto:pastor.joyce.brooks@gmail.com)

### Yellowstone Missionary District Addresses:

Bishop: [bishopjmz122@gmail.com](mailto:bishopjmz122@gmail.com)

CFT: [fr.brmiller@gmail.com](mailto:fr.brmiller@gmail.com)

### San Diego Deanery Addresses:

Dean: [freric.cksd@gmail.com](mailto:freric.cksd@gmail.com)

CFT: [frbrian@holyspiritchurchsd.org](mailto:frbrian@holyspiritchurchsd.org)

### Diocese of Western Anglicans Email Addresses:

[jenna.vazquez@westernanglicans.org](mailto:jenna.vazquez@westernanglicans.org)

[canonadmin@westernanglicans.org](mailto:canonadmin@westernanglicans.org)

Date Submitted	Aspirant Name
Church Name	Deanery
Date Accepted (to be completed by Diocese)	Signature (to be completed by Diocese)



# DIOCESE OF WESTERN ANGLICANS

## VOCATIONAL DEACON APPLICATION

This application is to be filled out by Aspirants in the Diocese of Western Anglicans Clergy Formation Process. All records submitted will be kept confidential and will only be used in the evaluation of eligibility.

**Date:**

**Name:**

**Address:**

**Phone:**

(cell)

(home)

(work)

**Email:**

**Other:**

**Birth Date:**

**Gender:**

**Social Security Number:**

**Date of Marriage (if applicable):**

**Spouse's Name:**

**Spouse's Social Security Number:**

**Name(s) and Birth Date(s) of Child(ren):**

**Have you previously applied for ordination in this or any other denomination?** ☐ Yes ☐ No

**Have you ever been ordained in this or any other denomination?** ☐ Yes ☐ No

**If Yes, when?**

**Where?**

**To Whom?**

**Current Congregation Affiliation:**

**Location:**



**How Long?**

**Name of Rector:**

**Church Where Baptized:**

**Date:**

**Address:**

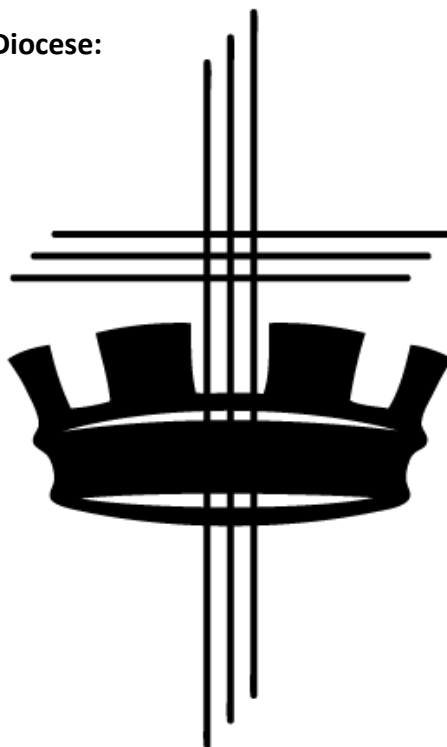
**Church Where Confirmed:**

**Date:**

**Address:**

**Confirming Bishop:**

**Diocese:**



## PERSONAL STATEMENT

### CHURCH HISTORY

1. If you were not raised from infancy as an Anglican, describe briefly how you came to join the Anglican Church. If you were, describe briefly why you have stayed. Describe what brought you to the Anglican Church in North America (ACNA).
2. If you were part of an ordination process in any other diocese, whether Anglican or not, what caused you to stop the process or leave it?
3. Describe your present congregational affiliation, mission or other ministry setting, and your activities there.
4. List all church affiliations prior to your present one, including names of churches, dates of affiliation and level of involvement.

### FAMILY HISTORY

Provide all information about your family background relevant to your call to ordination. Include information about your upbringing and how it has impacted you, for better and for worse.

### MARRIAGE HISTORY

If married, write a statement on marriage and include a statement on marriage written by your spouse and his or her feelings on your desire to be ordained. If single, write about your single life.

### PSYCHOLOGICAL GROWTH

Describe your areas of psychological growth and areas where you need to grow. Describe how you deal with stress. If you have had professional counseling, describe the reason(s), who you counseled with, what the outcome was, and the date(s) you were in counseling.



## **PROBLEM AREAS**

Describe any past or current problems with alcohol, drugs (legal and illegal), sexual activity outside marriage, pornography, and/or any inappropriate online behavior/social media conduct.

## **OCCUPATIONAL HISTORY**

Describe your present job and list all the jobs you have held since college (or in the last ten years); include your duties and positions. You may also attach a copy of your current résumé.

## **ACADEMIC INTERESTS**

Describe any graduate work you have had or other special training or intellectual development, including your highest academic interests.

## **STATEMENT OF FAITH**

Write a personal statement of your faith journey, including key events and people..

## **CALL TO ORDINATION**

Summarize your understanding of the diaconate and your own reasons for feeling called to ordination.

## **CHURCH PLANTING AND MISSIONS EXPERIENCE**

Describe any experience you have had in personal evangelism, church planting, and local or international missions.



**Congregation Leader's Name:**

**Aspirant's Name:**



## FINANCIAL STATEMENT

**Name:**

**Address:**

**Dependents (please list by name[s] and birthdate[s]):**

ANTICIPATED ANNUAL EXPENSES		ANNUAL INCOME	
School (tuition, books, supplies, fees, etc.) (if applicable)	\$	Earnings	\$
Living Expenses (housing, food, insurance, med/dental)	\$	Personal Savings/ Investments	\$
Other (alimony, child support, etc. Please specify )	\$	Gifts from Parents or Relatives	\$
		Other (please specify)	\$

**Total Annual Expenses: \$**

**Total Annual Income: \$**



## RELEASE OF INFORMATION AGREEMENT

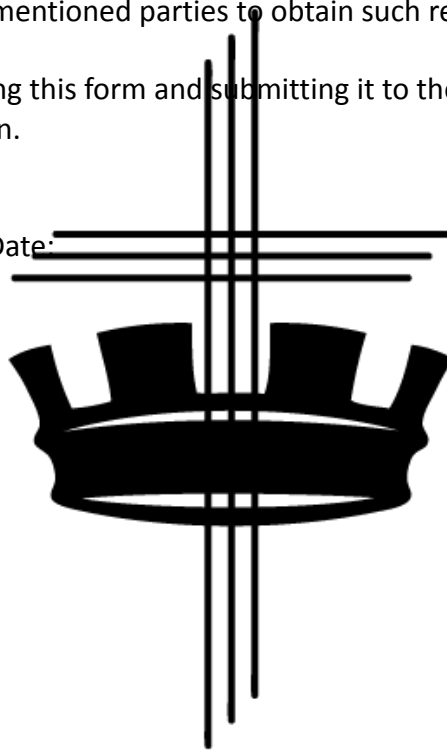
I understand that all materials pertaining to the Diocese of Western Anglicans' (DWA) ordination process through the Clergy Formation Process will be read and utilized by the Clergy Formation Team Leader, the Clergy Formation Team, the Canon for Clergy Formation, and the evaluating Diocesan Bishop for the determination of my application to be considered for Holy Orders. These materials may also be shared with other relevant parties on a strictly need-to-know basis.

I understand that this authorization will expire upon my DWA ordination to the diaconate or upon my written request to revoke my consent, whichever is earlier.

I hereby authorize the above-mentioned parties to obtain such records as required.

I understand that by completing this form and submitting it to the Diocese, I am consenting to the release of such information.

Aspirant's Name and Today's Date:



## ACCEPTANCE OF THE VISION, VALUES AND MISSION OF THE DIOCESE OF WESTERN ANGLICANS

I affirm the Diocese of Western Anglicans' statement of Vision, Values and Mission and its power to guide me in my formation as a future clergy leader of the Diocese of Western Anglicans.

Aspirant's Name and Today's Date:



## Application for Academic Course Equivalency Credit (Optional)

The following information must be submitted to the CFT and to the Canon for Clergy Formation, who will evaluate the material and determine whether or not the prior course can serve as credit for one of the required academic courses.

**Name:**

**Address:**

**Telephone:**

**Email:**

**Equivalency requested for:** (mark one only)

- ☐ Survey of the Old Testament
- ☐ Survey of the New Testament
- ☐ Survey of Church History
- ☐ Introduction to Systematic Theology
- ☐ History and Theology of the Diaconate
- ☐ The Anglican Tradition
- ☐ Introduction to Global Mission

**Course Name:**

**Institution:** (Note: must be accredited)

**Date Taken:** (Note: course must have been taken within the past 8 years)

Please send this form, along with the following information, to the Canon for Clergy Formation:

- ☐ Course Syllabus
- ☐ One evaluated major paper or work
- ☐ Transcript of grade received for the class

I understand that the CFT/Canon may decide to accept the submitted material as credit, or may require me take the equivalency exam, or may require me to take the course at an accredited institution.

Aspirant's Name and Today's Date:



## Application for Academic Course Equivalency Exam (Optional)

The following information must be submitted to the CFT to request an equivalency exam.

**Name:**

**Address:**

**Phone:**

**Email:**

**Equivalency Exam requested for:** (mark only one per form)

- ☐ Survey of the Old Testament
- ☐ Survey of the New Testament
- ☐ Survey of Church History
- ☐ Introduction to Systematic Theology
- ☐ History and Theology of the Diaconate
- ☐ The Anglican Tradition
- ☐ Introduction to Global Mission

Please send this form, along with

- ☐ Evidence of prior formal training
  - Name of course/program:
  - Date/Place taken:
- ☐ A check for the \$50 exam fee, made out to "Diocese of Western Anglicans."

I understand that equivalency exams are "on site" exams and will be graded on a pass/fail basis. I also understand that I may take the equivalency exam in an area only once and if I am unsuccessful, I must take the required course at an accredited institution.

Aspirant's Name and Today's Date:

