The Old Catholic Ordinariate for Specialized Ministries – U.S.A.

1599 Old Thicket Court, Greenwood, Indiana 46143

APPLICATION FOR INCARDINATION

I. Basic Information

FULL NAME					
DATE OF BIRTH		BIRTHPLACE			
ADDRESS					
CITY		STATE		ZIP CODE	
PHONE		E-MAIL			

II. Family Information

RELATIONSHIP STATUS

☐Celibate ☐Single ☐Dating ☐Engaged ☐Married ☐Separated ☐Divorced ☐Remarried ☐Other

If you indicated separated, divorced, remarried, or other, please attach a summary of your situation for review.

NAME OF FIANCÉE / SPOUSE	
DATE OF MARRIAGE	
TYPE OF MARRIAGE	☐Sacrament of Matrimony ☐Civil Marriage ☐Common Law Marriage
FAITH TRADITION	

STATEMENT OF SUPPORT

A statement of support is required from the spouse (or fiancée) of any applicant for incardination with the Ordinariate. The statement must include an acknowledgement of the applicant's vocation, and a willingness to be a support and encouragement on the journey. The statement does not require the individual to take on any ministry or role, public or private, in conjunction with the ministry of the applicant. Please attach the statement to your application for review.

In the event the spouse is unable to attend the Incardination Mass, the statement will be displayed in lieu of the spouse's presence.

CHILDREN			
NAME		DATE OF BIRTH	
NAME		DATE OF BIRTH	
NAME		DATE OF BIRTH	
NAME		DATE OF BIRTH	

III. Sacraments of Initiation

BAPTISM	
DATE	
LOCATION	
RITE / TRADITION	

CHRISMATION	
DATE	
LOCATION	
RITE / TRADITION	

ADMISSION TO HOLY EUCHARIST	
DATE	
LOCATION	
RITE / TRADITION	

IV. Ordination History

DIACONATE	
DATE	
LOCATION	
RITE / TRADITION	
BISHOP	

Please attach a copy of your Ordination Certificate to this application.

PRESBYTERATE	
DATE	
LOCATION	
RITE / TRADITION	
BISHOP	

Please attach a copy of your Ordination Certificate to this application.

ORDINATIONS CONFERRED BY COMMUNITIES OUTSIDE OF APOSTOLIC SUCCESSION

If you have been ordained by any Christian community that does not possess verifiable lines of apostolic succession, please attach a summary of those ordinations for review. The Ordinariate values all ministerial experience and will review this information in determining a pathway for transitioning to ordained ministry with apostolic succession and episcopal oversight.

In the event the spouse is unable to attend the Incardination Mass, the statement will be displayed in lieu of the spouse's presence.

ELIGIBILITY FOR TRANSFER

I hereby certify that:

☐I am not currently subject to ecclesiastical discipline, censure, interdict, or excommunication.

☐I am not aware of any charges which may be pending against me in an ecclesiastical or civil court.

☐I have requested (or promise to request, upon acceptance of my application) Letters Dimissory from my current bishop.

Please attach a copy of your Letters Dimissory, or an explanation of your inability to request/receive such letters, to this application.

V. Education History

It is assumed that all applicants possess at least a High School Diploma or General Educational Development (GED) Certificate.

ALTERNATIVE ORDINATION / TRAINING PROGRAMS

If you completed an Old/Independent Catholic, Autocephalous Orthodox, or Continuing/Independent Anglican form of training in a monastic setting, or by 'reading for orders', please attach a transcript and contact information for an individual who can verify your attendance and the content of the course.

TERMINAL THEOLOGICAL DEGREE OR PROGRAM	
DATE	
INSTITUTION	
CITY/STATE	
SUBJECT	
COMPLETED?	

Please attach a copy of your degree to this application.

TERMINAL NON-THEOLOGICAL DEGREE OR PROGRAM	
DATE	
INSTITUTION	
CITY/STATE	
SUBJECT	
COMPLETED?	

Please attach a copy of your degree to this application.

CLINCAL PASTORAL EDUCATION	
NUMBER OF UNITS	
INSTITUTION	
CLINICAL SITE	
CITY/STATE	
RESIDENCY?	
SUPERVISORY?	

Please attach a copy of your most recent CPE Unit Completion Certificate to this application.

OTHER TRAINING

If you have been received any other training pertinent to your clerical state, please include information in an attachment.

VI. Consents and Statements

Please initial each section in the space provided.

CONSENT FOR COMPREHENSIVE BACKGROUND CHECK

_____ I hereby indicate my understanding that the Canonical Norms of the Ordinariate require my submission to a comprehensive background check, at my expense, to verify suitability for ministry. I agree to following the instructions of the Ordinary or his designee regarding which service to use to obtain the background check.

CONSENT TO CONTACT

Initial Only One

_____ I hereby give consent to the Ordinary or his designee to make contact with my current bishop (or ecclesial superior or equivalent) to verify eligibility for transfer.

_____ I hereby request that the Ordinary or his designee refrain from contacting my current bishop (or ecclesial superior or equivalent) for grounds which I have explained in the statement attached in lieu of presenting Letters Dimissory.

STATEMENT OF FINANCIAL RESPONSIBILITY

_____ I hereby indicate my understanding that The Old Catholic Ordinariate for Specialized Ministries – U.S.A. is a non-stipendiary ecclesiastical jurisdiction. No cleric associated with the Ordinariate, including the Ordinary, may promise or imply (orally or in writing) any salary, stipend, or financial benefit in exchange for service within the Ordinariate. Each cleric is responsible for their own living through engaging in honest labor which does not do violence to the Christian faith or serve to undermine the witness of the cleric.

STATEMENT OF COMMITMENT TO A SAFE ENVIRONMENT

_____ I hereby indicate my understanding that the Ordinariate has a zero tolerance policy for abuse and neglect. I agree to maintain, as directed, ongoing training and certification in Safe Environment procedures, and to regularly familiarize myself with the mandatory reporting requirements in the state(s) where I minister.

_____ I hereby indicate my understanding that failure to complete assigned Safe Environment training will result in the immediate suspension of faculties until I am up to date and that, should I be six months overdue, I will be dismissed from the Ordinariate. The only exceptions will be for individuals on a family/medical leave, and such an individual must become current before returning from leave.

STATEMENT OF FAMILY LIFE

The Ordinariate expects you, the applicant, to prioritize your personal relationship with God,
followed by the life and health of your family, followed by ecclesiastical/ministerial commitments.

_____ I hereby indicate my understanding that Ordinariate expects me to be a faithful participant in the life of my family. Those who are close to me have a right to expect my participation in their lives, my provision for their needs, and my fidelity to the bonds we share as a family. While the Ordinary pledges to give due consideration to any requests he shall make concerning me, I understand that it is my responsibility to both keep him informed of my family's needs, as well as any limitations on my ministry which must be considered for their sake. I further agree to immediately notify the Ordinary when family or health matters place limitations on my ministry, so that he may be fully aware.

DECLARATION OF INTENTION TO INCARDINATE

In the Name of the Father,
and of the Son,
and of the Holy Spirit.
Amen.

Let it be known that I, _____, do hereby declare that it is my intention to incardinate as a _____ with The Old Catholic Ordinariate for Specialized Ministries – U.S.A. under the jurisdiction of +Robert, by the grace of God bishop and ordinary of the jurisdiction.

I have reviewed, as thoroughly as possible, the Theological Statements, Canonical Norms, and Liturgical Texts of the Ordinariate. Having done so, I hereby declare:

- I believe that the Hebrew and Christian Scriptures reveal to us the deep mystery of God; teaching us all things necessary for a salvific and life-giving relationship with God, and with one another, through faith in Jesus Christ our Lord.
- I subscribe to the Apostles' and Nicene Creeds and accept, as sources of sound doctrine and practice, the liturgical texts of the Ordinariate.
- I will respect the pastoral direction and leadership of the Ordinary, and that of his successors, in all things that are just, lifegiving, and true.

In witness of these things, and in affirmation of my application and any attachments, I freely sign this document, and request the incardination process formally begin.

_____
Signature of Candidate

_____/_____/_____
Date of Signature

SUBMISSION INSTRUCTIONS

- Sections I-VI of this application may be completed in MS Word and returned by email. It may also be printed out, legibly completed in ink, and either scanned or mailed to the Office of the Ordinary.
- Any necessary attachments requiring a signature must feature 'wet signatures'. They may either be scanned or mailed to the Office of the Ordinary.
- The Declaration of Intention to Incardinate must be signed by hand and either scanned or mailed to the Office of the Ordinary.
- Typed initials in Sections I-VI shall be treated the same as 'wet initials' for processing purposes.