



# The Ecumenical Catholic Church

## Ordination/Clergy Reception Information and Application (Form 104)

I am applying for \_\_\_\_\_ ordination \_\_\_\_\_ reception \_\_\_\_\_ dual affiliation  
as a \_\_\_\_\_ permanent deacon \_\_\_\_\_ transitional deacon \_\_\_\_\_ priest

For Dual Affiliation, Present Denomination: \_\_\_\_\_

*Please submit the following to the Ecumenical Catholic Church vocations committee as directed on the last page. One copy of each of the following should be sent to the three addresses:*

1. *This information form.*
2. *A recent color photographs of yourself.*
3. *Your answers to the 11 questions in this form.*
4. *Copies of all supplemental documents requested in this form.*

*Please complete the form itself and return as soon as possible. This opens your file as a "candidate" for clergy status. The answers and supplemental documents should be completed promptly, but do not need to be submitted at the same time as the form itself.*

### Part I: Vital Statistics

**Attach a copy of your baptismal certificate and, if applicable, ordination documentation.**

Full name at birth/baptism: \_\_\_\_\_

Present name, if different: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ (work): \_\_\_\_\_

E-mail address: \_\_\_\_\_ Fax (home or work that can be used): \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Father's Full Name at His Birth: \_\_\_\_\_

Mother's Full Name at Her Birth: \_\_\_\_\_

Date of baptism: \_\_\_\_\_

Place of baptism: \_\_\_\_\_

Date of confirmation: \_\_\_\_\_

Place of confirmation: \_\_\_\_\_

Present parish membership: \_\_\_\_\_

Address: \_\_\_\_\_

Full name of present spouse or partner,\* if any: \_\_\_\_\_

Date and place of marriage: \_\_\_\_\_

*\*Note that the ECC recognizes both heterosexual and homosexual marriages which have been blessed through some sort of commitment ceremony, regardless of legal status. If you have a life-partner to whom you are not married, list him/her anyway and list "N/A" for the date of marriage.*

Names of Previous Spouses, dates of marriage and termination of marriage:

\_\_\_\_\_  
\_\_\_\_\_

Ordinations or ministerial service in other denominations (dates, place, denomination, etc.):

\_\_\_\_\_  
\_\_\_\_\_

Previous Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Dates of Residence: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License or ID: \_\_\_\_\_ State: \_\_\_\_\_

## **Part II: Academic Background and Employment**

- 1. Attach copies of both transcripts and diplomas from seminary/theological school.*
- 2. Attach copies of either diplomas or transcripts from all other college level education.*
- 3. Attach a resume or curriculum vitae delineating your employment history.*

High School: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ GPA: \_\_\_\_\_

Community College: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Major: \_\_\_\_\_ Degree: \_\_\_\_\_

Undergraduate: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Major: \_\_\_\_\_ Degree: \_\_\_\_\_

Graduate Theology: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Major: \_\_\_\_\_ Degree: \_\_\_\_\_

Other Graduate School: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Major: \_\_\_\_\_ Degree: \_\_\_\_\_

**Current Employer:** \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Telephone: \_\_\_\_\_

Supervisor's Name and Telephone: \_\_\_\_\_

May We Contact Employer as Reference?  Yes  No

If Not, why not? \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Do you have any past or current substance abuse issues?**  Yes  No.

Have you ever received treatment for substance abuse?  Yes  No.

If yes to either of the above, explain: \_\_\_\_\_

\_\_\_\_\_

**Have you ever been under the care of a psychiatrist/psychologist/therapist?**  Yes  No

Name of Therapist: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Nature of Therapy: \_\_\_\_\_

Do you now or have you ever taken any sort of prescribed psychotropic medication? \_\_\_\_\_

If so, which one(s) and for what reason? \_\_\_\_\_

\_\_\_\_\_

Does the medication prevent you from carrying on your daily duties? \_\_\_\_\_

If so, explain: \_\_\_\_\_

May we contact the therapist for reference/comment?  Yes  No

If not, why not? \_\_\_\_\_

*If more than one therapist, attach similar details on a separate sheet.*

*Receiving therapy or taking medication is not an automatic impediment to ordination/reception.*

**Have you ever been convicted of a misdemeanor or felony?**  Yes  No

Description of Offense: \_\_\_\_\_

Place and Date of Conviction: \_\_\_\_\_

Explanation of Circumstances: \_\_\_\_\_

*If more than one offense or need more space for detail, attach similar details on a separate sheet.  
Prior conviction is not necessarily an impediment to ordination/reception.  
Do not include routine traffic infractions (speeding, etc.),  
but do include more serious offenses such as DUIs, etc.*

**Investigation that locates convictions *not* disclosed will result in automatic rejection.**

**Provide the names of three personal references.** Please also request them to write a letter of reference for you and have it sent to the director of vocations. Please be aware that we may do follow-up telephone calls to these persons. Do not include relatives, partners, or ECC clergy.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

### **Part III: Personal Statements**

***Attach typewritten responses to the following eleven questions/requests. Each response should be about one to two pages in length. Be thorough yet succinct.***

1. Describe your personal religious history.
2. Describe your personal beliefs and theology.
3. What does ordination mean to you?
4. When did you first feel called to the ordained ministry? How did you know you were called? Why do you think God called you? How have you lived out this call in your life?
5. Describe the relationships and interactions between Church, society, theology, morality, sin, and grace.
6. How do think the following will relate to your life as an ordained person: dedication, study, servanthood, social activism, teaching, proclaiming, witnessing, chastity, poverty, obedience, work, marriage, family, community, faith, love, etc. (It is OK to not see some of these things relating to you, and you should feel free to comment on other characteristics not mentioned.)
7. When do you plan to be ordained/received, and what are your short-term desires or plans for ministry? Be specific as to where, specific outreach, how financed, etc.

8. Where do you see yourself in ten years? What are your most important objectives in life?
9. How do you plan to combine ministry with your other dreams, commitments, occupations, and relationships?
10. Why do you wish to associate with the Ecumenical Catholic Church? How will this affect your relationship with your present denomination? Why are you dissatisfied with your present or most previous denomination?
11. How do you relate to authority and structure in organizations? Are you prepared to fully support the Ecumenical Catholic Church, its canons, its vision, and its hierarchy?

**Statement of Faith**

By submitting this application, I, \_\_\_\_\_, state and confess that:

*I believe in One God -- the Father, Son, and Holy Spirit -- and accept the Christian Faith of the Apostles' and Nicene Creeds.*

*I reject sin and Satan.*

*I accept Jesus Christ as my Savior and Lord, trusting in His Grace and Love.*

*I desire to be ordained/received into the sacred, permanent, dedicated ministry of the Gospel of Jesus Christ in His one, holy, catholic, and apostolic Church.*

*I promise to be loyal to the Ecumenical Catholic Church, to its primate, and the bishops and other leaders into whose care I may be given.*

**Verification, Authorization, and Commitment**

*I certify that all information contained in this application and its supplemental materials is true and correct.*

*I authorize the Ecumenical Catholic Church to investigate my personal background and credit, criminal, employment, and other records.*

*If requested, I agree to undergo a psychological evaluation for suitability for priesthood and/or pastoral ministry at my own expense.*

*If requested, I will obtain a letter of good conduct from a local law enforcement agency.*

*I authorize any minister, church, employer, government or law enforcement agency, credit or financial institution, psychologist, psychiatrist, therapist, or other person, organization, or institution to discuss my background and qualifications as related to the ordained ministry and/or to provide copies of or access to records and files related to me.*

*I agree to support the Ecumenical Catholic Church through my time, talents, and financial gifts to the best of my ability.*

*I understand that the commitment of ordination is life-long in nature. I believe I am qualified and capable of making such a commitment to God and to the Ecumenical Catholic Church.*

Signed: \_\_\_\_\_

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Witness: \_\_\_\_\_

Return the original of this form and supplemental material to the following address. If you have not already received copies of the Canon Law and Doctrinal Statements, the *Holy Eucharist and Sacramental Rites* (our Prayer Book), and *History of the Ecumenical Catholic Church* they can be downloaded from our website: [www.ecchurch.net](http://www.ecchurch.net).

**Office of the Archbishop**

Bishop David John Kalke

José Natividad Macías 1298

Frac. 18 de marzo, C.P. 44960

Guadalajara, Jalisco, MX

Teléfono: (52) 33 3144 6704

Correo electrónico: [david.john@ecchurch.net](mailto:david.john@ecchurch.net)

*Do NOT feel that you must return the package 100% complete. For example, you do not need to hold up your basic application and answers to the questions while you are searching for your baptismal certificate or a college transcript. However, they must ultimately be submitted unless otherwise instructed.*