EPISCOPAL DIOCESE OF IOWA
APPLICATION FOR COMMISSIONING and ORDERING of a MINISTRY DEVELOPMENT TEAM

Application

To the Bishop of the Diocese of Iowa:

We hereby make application for reaffirmation of Commissioning and further Ordering as a Ministry Development Team in the Diocese of Iowa. We, as a ministry team, were admitted to Postulancy (date); Candidacy on (date); and presbyteral candidates Ordered as transitional deacons on ............................................

Ministry Team of (Date)......................................................... ......................................................... Church ........................................................... , Iowa

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Reaffirmation of Roles - The following persons are seeking Ordination

I, .................................................   ...........................…....................   ...................................…..........
(first)    (middle)          (last) hereby make application for Ordering as a ......................................................... in the Diocese of Iowa. (Vocational Deacon/Priest)

(Date).........................................................   (Signed)..................................................... ................. Candidate
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I, .................................................   ...........................…....................   ...................................…..........
(first)    (middle)          (last) hereby make application for Ordering as a ......................................................... in the Diocese of Iowa. (Deacon/Priest)

(Date).........................................................   (Signed)..................................................... ................. Candidate
I, .................................................   .........................................................   .........................................................
(first)    (middle)          (last)
hereby make application for Ordering as a ......................................................... in the Diocese of Iowa.
(Deacon/Priest)

(Date).........................................................   (Signed).........................................................
Candidate

I, .................................................   .........................................................   .........................................................
(first)    (middle)          (last)
hereby make application for Ordering as a ......................................................... in the Diocese of Iowa.
(Deacon/Priest)

(Date).........................................................   (Signed).........................................................
Candidate

I, .................................................   .........................................................   .........................................................
(first)    (middle)          (last)
hereby make application for Ordering as a ......................................................... in the Diocese of Iowa.
(Deacon/Priest)

(Date).........................................................   (Signed).........................................................
Candidate

Certificate from Rector and Vestry

We do certify that, after due inquiry, we are well assured and believe that the aforementioned
Ministry Team possesses such qualifications as would be fitting for Commissioning and, where
appropriate, Ordering as Deacon and Priest as indicated in their applications above.

(Date).........................................................   (Signed).........................................................
Rector
VESTRY
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(The above must be signed by the Vestry, or in case of no organized parish, by six laypersons, communicants of this Church in good standing).
Attestation

I hereby certify that ............................................................................. are members of ............................................................................. (parish) in ..................................., Iowa; and confirmed adult communicants in good standing; that the foregoing certificate was signed at a meeting of the Vestry duly convened at ............................................................................. on the ................... day of .............................., in the year ................., and that the names attached are those of all (or a two-thirds majority of all) the members of the Vestry.

(Signed)......................................................................
Clerk of Vestry

Certificate of Program of Preparation

This is to certify that ............................................................................. has been duly enrolled in a course of study involving The Iowa Curriculum and that our evaluation of his/her/their personal qualifications for the ministry of this church, have been furnished to the Bishop of the Diocese of Iowa.

(Date)..........................................................  (Signed)..................................................... .................
Coach to Ministry Team

(Date)..........................................................  (Signed)..................................................... .................
Willa Goodfellow, Coach to Coaches

Commission on Ministry

This is to certify that in our judgment .................................................. is engaged in continuing formation and that the team's plans for continuing education meet with our approval; and hereby receives our reaffirmation of Commissioning and, where appropriate, recommendation for Ordering as Deacon and Priest as identified above.

THE COMMISSION ON MINISTRY

(Date)..........................................................  (Signed) .................................................... ..................
Chairperson

Testimonial of the Standing Committee

To the Bishop of the Diocese of Iowa:

We, the Standing Committee of the Diocese of Iowa, having been duly convened at .................................................., having interviewed the candidates, do affirm the afforenamed ministry team of ........................................................... Church for Commissioning and, where appropriate, for Ordering as Deacons and Priests as identified above.

In witness whereof, we have hereunto set our hands this .............. day of ______________________, in the year of our Lord ..................

STANDING COMMITTEE

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(Or a majority of all members thereof. This testimonial shall be signed by all consenting to its adoption.)

cc: Candidates/Ministry Team c/o Church; Member of Clergy; Commission on Ministry; Standing Committee; Dean of seminary/Director of program of preparation

05/08