The Episcopal Church in West Missouri

*Licensed Ministry Application*

***Preacher***

 [x]  *New* [ ]  *Renewal*

Full Name:

Mailing Address:

Email Address:       Phone #:       This is a (*please check one*) [ ]  landline [ ]  mobile

Congregation & Location:

Length of time resident in this congregation:

Baptized: When:       Where:

Confirmed: When:       Where:

**A. MINISTRY and EDUCATION**

***For a New License:***

1. *Describe* below the course(s) of study and training that you have followed to obtain the necessary theological and biblical knowledge as well as the needed oratory skill for this license. *Attach separate sheet as necessary.*
2. *How do you intend to exercise* the ministry of preacher?
3. *How will you hold yourself accountable* in the exercise of this ministry?

1. *Please request a statement from your instructor and acquire the endorsements requested in* ***Part C.*** *of this form.*

***To Renew a License***:

1. *Describe* below the course(s) of study and training you have followed since your license was issued to maintain your education and skills. *Attach separate sheet as necessary.*
2. *Describe* how you have utilized this license since it was granted including the number of times used and other preaching activities that have occurred.
3. How would you *evaluate your ministry* as a preacher?

1. *Please request a statement from your instructor and acquire the endorsements requested in* ***Part C.*** *of this form.*

**B. LICENSE BACKGROUND & MINISTRY PLEDGE**

***Please list other licenses you hold or have held, indicating date of issue and noting those currently held:***

I pledge to carry out this ministry to the glory of God, under the authority of the Bishop of West Missouri, and with the integrity befitting this sacred trust.

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Signature of applicant Date

**C. ENDORSEMENTS**

***Instructor/Mentor*** Please accept our thanks for your guidance.

1. *Describe* the course/workshop/study the candidate completed under your supervision*.*
2. *Evaluate* the candidate’s participation is such course/workshop/study.
3. *Do you recommend* this person to receive licensing?

[ ]  yes [ ]  no

1. *Make a recommendation* for continuing education/formation (if any).

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Your name and title (*printed*)

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Name of institution (if any) or your position/qualification

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Your signature Date

***Clergy-in-Charge***

I certify that the applicant is a communicant in good standing of this congregation and qualified for this license.

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Rector/Priest-in-charge Date

 ***Governing Body***

The Vestry/Bishop’s Committee, by action at a regular meeting, recommends that this application for licensed ministry be approved.

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Clerk of Vestry/Bishop’s Committee Date

**D. RETURN TO DIOCESAN OFFICE**

 Include the following with this application:

***For a New License:***

1. Provide two sermons (a video of the homily being delivered is preferred, but audio alone may be submitted. For either video or audio, a manuscript or transcription should also be provided):
	1. A sermon for a regular Sunday worship service;
	2. A sermon for a pastoral occasion such as a funeral, wedding, baptism, or healing service.
2. For each sermon, identify the occasion, the lessons used (i.e. the lectionary’s Proper of the Day), or the scripture reading(s) chosen.

*Sermons may be mailed as a DVD or uploaded to a video sharing site (such as YouTube, Dropbox, etc.). If you choose to upload, please include a link to your sermon(s) here:*

*Should you choose not to submit your sermon as a video, the Licensed Ministry Committee of the Commission on Ministry may request to hear you preach in person.*

***For Renewing a License:***

1. One sermon (as above)
2. A review from your priest, mentor, or 2 parishioners.
3. Your goals for the next three years for growth in preaching, study, and practice.

**Send signed application form and additional documents to:**

The Diocese of West Missouri

 Attn: Assistant to the Bishop

 420 West 14th St

 Kansas City, MO 64105

**or email files to:** bishopsassistant@diowestmo.org