

# APPLICATION FORM

## **License to Officiate in the Episcopal Diocese of Newark**

Application Date:

Name:

Address:

Phone Number (home):  
(mobile):

Email:

Date of Birth (mm/dd/yyyy):

Where are you canonically resident?

Who is the Bishop of your diocese?

When and where were you ordained?

As Deacon

Date:

Location:

As Priest

Date:

Location:

Are you retired?

If yes, please list your date of retirement.

How long have you lived in the Diocese of Newark?

Have you previously functioned as a priest in this diocese?

Describe your ministry here and give the time frames.

Where do you worship?

Are you willing to serve as a supply priest?

Are you willing to serve on diocesan committees and commissions?

What are your interests and gifts in ordained ministry?

Mail or email this application with all required documentation to:

Randy Johnson, Administrator for Diocesan Ministries, PO Box 386, Livingston NJ 07039-0386  
rjohnson@dioceseofnewark.org

Revised December 2024