



CLERGY PROFILE FORM

For Clergy who are newly ordained, transferring into the Diocese,
Or up-dating their present profile.

INFORMATION NEEDED BY THE EPISCOPAL OFFICE FOR CLERGY FILES

The following information is needed by the Diocese to complete and/or update their files.

0000 – 0000 Indicates dates not known, please provide dates if available
YYYY Use YYYY to indicate present membership on Committees etc.

Last Name: _____
(Please Print)

Christian Name(s): _____
(Please Print)

Maiden Name (if applicable): _____
(Please Print)

Date of Birth: _____

Post Secondary Education: Degrees Earned, University/College, Location and date received. This is for formal education, continuing education and workshops can be added elsewhere on the form.

Sample:

B.A. Carleton University, Ottawa 1994
M.Div. Trinity College, Toronto 1997

Ordination Information: Date; Location; (including the name of the church, city, province and Diocese if other than in the Diocese of Ottawa) and the name of Bishop.

Deacon:

Date: _____

Location: _____

Name of Presiding Bishop: _____

Priest:

Date: _____

Location: _____

Name of Presiding Bishop: _____

Parish Appointments: Includes appointment date (exact date if available), licensed title (Assistant Curate, Priest in Charge etc.), and the name of the Parish. (For clergy transferring in, please indicate Diocese.)

Sample:

20/05/2000 Assistant Curate, Christ Church Bell's Corners

20/06/2002 Incumbent, St. Stephen's, North of Ottawa

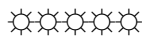
Other Episcopal Appointments: Includes appointments such as Regional Dean, Canon, Archdeacon, Chaplains etc.

Sample:

01/01/2000 Regional Dean, Lanark

Marriage Registration Number(s): Please indicate province if you hold a registration number in both Ontario and Quebec.

Marriage Number(s) _____



THE FOLLOWING INFORMATION IS REQUESTED IN ORDER TO KEEP YOUR PROFILE IN THE EPISCOPAL OFFICE UP TO DATE.

Spouse: Please provide full name, date of birth, date of marriage, and indicate your current marital status (i.e. married, separated, divorced or widow/widower).

Name: _____
(Please Print)

Date of Birth: _____

Date of Marriage: _____

Marital Status: _____

Children: Please provide **full name** and date of birth. (Continue on back if necessary)

Child # 1 _____ Date of Birth _____
(Please Print)

Child # 2 _____ Date of Birth _____
(Please Print)

Child # 3 _____ Date of Birth _____
(Please Print)

Child # 4 _____ Date of Birth _____
(Please Print)

Child # 5 _____ Date of Birth _____
(Please Print)

Child # 6 _____ Date of Birth _____
(Please Print)

Other Education/Continuing Education: Courses taken at Universities, Pastoral Care Units, Alban Institute etc. (does not include one day workshops)

Sample:

Preaching Course, Alban Institute (1 week) 1998

Diocesan Work/Committees: Please list dates, position i.e. member, secretary, chair, and name of committee. Include Provincial Synod and National Church experience.

Sample:

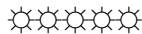
2001 - 2003 Member, Benefits Committee
2005 - YYYY Chair, Investment Committee (Indicates Chair from 2005 to present)

Community/Volunteer Work: Includes ecumenical ministerials, working groups, and activities within the community.

Sample:

2001 – 2005 Member, Ministerial of Carp
2006 – 2009 Chaplain, Legion Branch of North Ottawa

Publications: List Name of Publication and date published



**INFORMATION THAT IS NOT REQUIRED BUT MAY BE USED FOR
GENEALOGICAL PURPOSES.**

Please note that this information is considered confidential and will be kept in the Bishop's clergy files. The information given is protected by our Diocesan Privacy Policy. Family information on your birth or marriage, will not be made available to the public until the earlier – either of a full century since the information was gathered or twenty years have passed since your date of death.

Your Location of Birth: Please indicate City, Province/State, Country

Your Location of Marriage: Please indicate City, Province/State, Country

Former Spouse: If applicable please provide **full** name, date of birth, date and location of marriage, and indicate if spouse is divorced or deceased.

Name: _____
(Please Print)

Date of Birth: _____

Date of Marriage: _____

Location of Marriage: (city, province etc.) _____

Marital Status: _____

Previous Former Spouse: If applicable, please provide **full** name, date of birth, date and location of marriage, and indicate if spouse is divorced or deceased.

Name: _____
(Please Print)

Date of Birth: _____

Date of Marriage: _____

Location of Marriage: (city, province etc.) _____

Marital Status: _____

Children: Please indicate where your children were born

Child #1 _____

Child #2 _____

Child #3 _____

Child #4 _____

Child #5 _____

Child #6 _____

Other Full Time Employment: Includes year(s), position, and employer. This is for employment other than ordained ministry.

Sample:

1990 – 1992 Insurance Adjustor, Manulife Insurance

PLEASE RETURN THIS COMPLETED FORM TO:

Bishop's Office
71 Bronson Ave.
Ottawa, ON K1R 6G6

Form may be given to the Bishop's Assistant or mailed in.
Please mark confidential on the front of the envelope.