

SOCIAL HISTORY FORM DIOCESE OF EASTERN OREGON

This document is **Confidential**. Please return the completed document separately from other documents addressed: The Rt. Rev. Patrick Bell, The Episcopal Diocese of Eastern Oregon, PO Box 236, Cove, OR 97824. Mark the mailing envelope Confidential.

Please fill in the answers to the following questions. Use additional sheets of paper if necessary.

	Date	
NAME		
NAMEFirst	Middle	Last
Any other names used)		
CURRENT ADDRESS		
PERMANENT ADDRESS (if di	ifferent)	
TELEPHONE (Home)	(Work)	
E-MAIL ADDRESS		
OTHER PRINCIPAL RESIDENCES	UP TO THE PRESENT:	
DATE OF BIRTH	BIRTHPLACE	
SOCIAL SECURITY NUMBER	Male	Female
SPONSORING PARISH/MISSION		

How long have you been a member of this congregation?
How long have you been resident in the Diocese of Eastern Oregon?
Have you ever applied for Holy Orders in this or any other Church?
If so, when? Where?
What was the result of that application?
MARITAL STATUS
Single Married Partnered Divorced Separated Widowed
Date of present marriage (if applicable):
Spouse/Partner's Name
Spouse/Partner's DOB
Spouse/Partners's Religious affiliation (if applicable):
Spouse/Partner's Employment
Give a brief evaluation of spouse/partner's feelings regarding your intent to enter ordained ministry

Please provide a brief description of your marriage/relationship (if applicable):

Date of Marriage	Name of Former Spouse	Date of Termination
CHILDREN (if applicable)		
Name		Date of Birth
		_

If there are children over the age of 10, please give a brief evaluation of your children's feelings regarding your intent to enter ordained ministry:

EDUCATION High School (name, place)				
Dates attended				
Please list all post high school		e attended:		
Name of College or University	Dates Enrolled From	<u>To</u>	<u>Degree</u>	Major
Please describe any academ engaged during your post-sec				_
Please discuss your readiness	s and ability to undertake th	neological stud	dies at this time.	
Please discuss your current p	lans to undertake theologic	cal education.		
Please discuss your plans for	financing your theological	education.		

EMPLOYMENT HISTORY (Please list all positions held in the past ten years, beginning with the current or most recent.)

Da	tes			Hot	urs/
<u>From</u>	<u>To</u>	<u>Position</u>	Company/Address	Week	<u>Salary</u>
(Usa raya)	rsa or addition	nal sheets, if necessar	w)		
(Ose rever	se or addition	iai sneeis, ij necessar	y.)		
In your ov	vn words, des	cribe the reasons for a	ny job changes.		
What type	es of work hav	e you liked best and le	east?		
Please dise	cuss any recer	nt continuing educatio	n related to your employmen	nt.	

Please give the names, dates of birth, religious affiliation and principal occupation of your parents and siblings. Please include marital status. If separated, divorced or deceased, please give dates.
If applicable, please give a brief description of each parent's and sibling's feelings about your intent to enter ordained ministry?
Briefly describe your childhood. Is there any family history of physical/emotional abuse, alcohol or drug abuse, emotional/behavioral problems? Please describe.

HEALTH

Please describe your current physical and mental health
List any medications taken.
Do you have any physical handicap? Have you ever been treated for a serious illness or injury? Have you ever been treated or counseled for mental illness or emotional disturbance? Are you presently undergoing therapy or counseling? Have you ever received treatment for drug or alcohol abuse?
(If you answered "yes" to any of these questions, please describe below.)
LEGAL HISTORY (You are also subject to a background investigation which has a separate form and will be completed prior to Candidacy.)
Have you ever been convicted of a crime against a person? Yes No
Have you ever been found to have sexually assaulted or exploited a minor in a dependency action, a domestic relations proceeding, a disciplinary board final action or any other proceedings? Yes No
Have you ever been the subject of a restraining order? Yes No
Have you been charged or convicted of any crime?
Do you have any legal matters pending at this time? <i>Yes No</i>
If you answered "yes" to any of the above questions, please provide details.

RELIGIOUS HISTORY:

Please give the date and place of your baptism, and the denomination of the church in which it was recorded.

recorded.
Please describe the circumstances under which you joined the Episcopal Church and any previous religious affiliations you have had.
When did you begin attending the Episcopal Church? (give date) Please list the date and place of your Confirmation or Reception in the Episcopal Church.
Do you currently have a spiritual director? If so, how long have you worked with this person? How has this relationship been helpful?
MINISTRY: Please discuss your current and past ministries, both within the church and in daily living.
Please briefly discuss your call to the ordained ministry.

Please describe your gifts which will help you to live out the ordained ministry.
ADDITIONAL INFORMATION
Are there any other issues about your history about which the bishop should know?
[Signed]
[Date]