



## APPLICATION FOR HOLY ORDERS: PRIEST FORM 3: CONGREGATION DISCERNMENT TEAM'S REPORT

**DIRECTIONS:** You may print this form and complete it manually **OR** you may type your responses on this form and print it for further processing.

*We, the Congregation Discernment Team members of the*

**PRINT** name of Congregation:

Church's street address:

City:

State:

Zip code:

*having met on the following dates (mm/dd/yy)*

*are reporting on behalf of*

**PRINT** Aspirant's full name:

Date of birth:

*and with consensus, we make the following recommendation that the Aspirant is called to be a Priest.*

**PRINT** name

Signature

Date (mm/dd/yy)

**NOTE:** Please complete this form, attach a supporting *Report of the Congregation Discernment Team*, and the *Rector's, Vicar's, or Priest-in-Charge's Confidential Letter of Recommendation* and mail it to:

**Bishop's Office, Episcopal Diocese of Rhode Island, 275 North Main Street, Providence, Rhode Island 02903-1298**