

The Episcopal Diocese of Montana

Application to be Ordained to the Sacred Order of Deacons

To the Bishop of the Diocese of Montana:

I, _____, hereby make application to be
(Full Name)
ordained a Transitional Deacon in Christ's holy catholic Church.

+ + +

In compliance with Title III, Canon 8, section 6, (d)(1), I submit the following information:

Date of birth: _____

Date of admission to Postulancy: _____

Date of admission to Candidacy: _____

+ + +

Signed: _____ Date: _____

+ + +

Date received in Diocesan Office: _____