



Seeker's Information Form

Personal

Full Name: _____

Permanent Address: _____

Temporary Address: _____

Preferred Phone: (_____) _____ - _____ Home Work Cell

Preferred E-Mail Address: _____

Gender: _____ Identification/Pronoun: _____

Birthday (mm/dd/yyyy): ____/____/____ Location (City, State): _____

Communicant of (Parish/Worshipping Community Name, City): _____

Length of Time: _____

Resident of East TN Since (mm/yyyy): ____/____

Baptism Date: ____/____/____ By (Clergy Name): _____

Location: _____

Confirmation Date: ____/____/____ By (Clergy Name): _____

Location: _____

Previous Application for Postulancy? (Yes/No): _____ Date: ____/____/____

Location, & Result: _____



Seeker's Information Form

Education

Current Enrollment

Institution Name

Subject of Study

Enrolled Since

<input type="text"/>	<input type="text"/>
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Previous College/University

Institution Name

Degree Earned/Major Subject

Dates Attended

<input type="text"/>	<input type="text"/>
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Institution Name

Degree Earned/Major Subject

Dates Attended

<input type="text"/>	<input type="text"/>
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Institution Name

Degree Earned/Major Subject

Dates Attended

<input type="text"/>	<input type="text"/>
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High School

Institution Name

Diploma or GED

Dates Attended

<input type="text"/>	<input type="text"/>
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Seeker's Information Form

Employment/Vocation

Current Employment

Employer (Current)	Dates Employed	Types of Work/Position
What You Like Best		What You Like Least

Previous Employment

Employer	Dates Employed	Types of Work/Position
What You Liked Best		What You Liked Least

Reason for Leaving

Employer	Dates Employed	Types of Work/Position
What You Liked Best		What You Liked Least

Reason for Leaving

Employer	Dates Employed	Types of Work/Position
What You Liked Best		What You Liked Least

Reason for Leaving



Seeker's Information Form

Family

Current Status (please check): Single Married Partnered Engaged Separated Divorced Widowed

To/From Whom: _____

Gender/Pronoun: _____

Length or Date: _____

Previously Married/Partnered? _____

Spouse/Partner's Feelings Regarding Application/Call/Intent (brief statement where applicable)

Empty text box for spouse/partner's feelings.

Children

Table with 4 columns: Name, Birth Date (mm/dd/yyyy), Vocation, Gender/Pronoun. Contains 5 empty rows.

Parents

Table with 4 columns: Name, Residence (City, State), Vocation, Religious Affiliation. Contains 3 empty rows.

Children's and/or Parents' Feelings Regarding Application/Call/Intent (brief statement where applicable)

Empty text box for children's and/or parents' feelings.



THE EPISCOPAL DIOCESE OF EAST TENNESSEE

Reconciling All Things in Christ

Seeker's Information Form

Spiritual Autobiography & Photograph

Attach a brief spiritual autobiography using the guidelines in the discernment handbook.

Attach a recent photograph of yourself (only).

Application

Seeker's Signature & Date

Signature: _____ Date (mm/dd/yyyy): ____/____/____

Please return this completed form and two attachments to:

The Rt. Rev. Brian Lee Cole
Diocese of East Tennessee
814 Episcopal School Way
Knoxville, TN 37932

or

Email a scan to bcole@dioet.org and lnichols@dioet.org