



National - Regd & Estd -1928

# Anglican (Episcopal) Church of India

(Asstd with DOTC, CEEC, EEC, EFI, AAC, GAFCON, ACNA, FCOE & OAC)

Synod Office: Kottayam-KI, H.Q: New Delhi, Regl Office: Secunderabad-TS, Corp.Office: Chennai

TN & PY Diocese Off: 1/E-247, 9th Street, Bethel Nagar, Injambakkam, E.C., Chennai-600 115.

9884634635 | www.anglicanchurchofindia.org | bishopanglican@gmail.com

## APPLICATION FOR AFFILIATION / ORDINATION / CONSECRATION

Instructions:

1. Please complete this form in clear block letters.
2. All fields marked (\*) are mandatory.
3. Attach copies of required documents.
4. Submission of this form does not guarantee approval. The decision of the Ecclesiastical Board is final.

AFFIX  
PASSPORT SIZE

### 1. APPLICATION TYPE

Affiliation (Church / Ministry)       Ordination       Consecration

### 2. PERSONAL INFORMATION

1. Full Name (as per Aadhaar): \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_
3. Marital Status:  Single     Married
4. Spouse's Name & Occupation: \_\_\_\_\_
5. Children (if any): \_\_\_\_\_
6. Residential Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Pincode: \_\_\_\_\_
7. Mobile No.\*: \_\_\_\_\_ Email ID\*: \_\_\_\_\_
8. Nationality: \_\_\_\_\_
9. Aadhaar No.\* \_\_\_\_\_ 10.PAN No.\* \_\_\_\_\_

### 3. EDUCATIONAL BACKGROUND

10. Secular Qualification(s): \_\_\_\_\_
11. Theological Qualification(s)\*: \_\_\_\_\_  
(Attach copies of certificates)



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### 4. SPIRITUAL BACKGROUND

12. Date of Salvation Experience: \_\_\_\_\_

13. Date of Baptism\*: \_\_\_\_\_

14. Name of Spiritual Mentor / Pastor: \_\_\_\_\_

Contact: \_\_\_\_\_

15. Briefly describe your call to ministry\*:

\_\_\_\_\_

### 5. MINISTRY INFORMATION

16. Current Ministry / Church Name: \_\_\_\_\_

17. Type of Ministry:  Church  Fellowship  Outreach  Educational  Other

18. Year Ministry Started: \_\_\_\_\_

19. Average Attendance / Members: \_\_\_\_\_

20. Registered under (Society / Trust): \_\_\_\_\_

Registration No.: \_\_\_\_\_ Date: \_\_\_\_\_

Website / Social Media (if any): \_\_\_\_\_

21. Do you hold prior ordination or credentials?  Yes  No

(If yes, specify organization and attach copies.)

### 6. STATEMENT OF FAITH & PURPOSE

22. Why do you seek ordination / affiliation / consecration with the Anglican Church of India?

\_\_\_\_\_

23. How will this association enhance your ministry?

\_\_\_\_\_



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24. Are you willing to abide by the doctrine, liturgy, and constitution of the Anglican Church of India?  Yes  No

25. Are you willing to contribute faithfully through tithes and annual contributions?  Yes  No

### 7. ADMINISTRATIVE & LEGAL INFORMATION

26. Any previous or current legal proceedings?\*  Yes  No

(If yes, attach explanation and clearance documents.)

27. Do you file Income Tax returns regularly?\*  Yes  No

28. Are you presently serving under another denomination?  Yes  No

(If yes, give details.)

29. Police Verification Certificate\*  Yes  No

(If not available, kindly initiate the process and attach it at the time of submitting the application.)

### 8. REQUIRED DOCUMENTS

30. Two Passport-size Photos

31. Photo ID and Address Proof (any two)

32. Educational & Theological Certificates

33. Ministry Registration Certificate (if applicable)

34. Personal Testimony / Ministry Report (1-2 pages)

35. Church or Board Resolution (for affiliation only)

36. Family / Ministry Photographs



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### 9. REFERENCES

37. Provide two references from ordained ministers or senior church leaders:

A. Name: \_\_\_\_\_ Contact: \_\_\_\_\_

B. Name: \_\_\_\_\_ Contact: \_\_\_\_\_

### DECLARATION

I hereby declare that the information provided above is true and correct to the best of my knowledge.

I agree to uphold the faith, discipline, and doctrinal standards of the Anglican Church of India, and submit to its ecclesiastical authority.

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Recommended by (1): \_\_\_\_\_

Recommended by (2): \_\_\_\_\_

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### For office use only:

Application No.: \_\_\_\_\_ **Approved / Deferred / Rejected**

Remarks: \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_

Date: \_\_\_\_\_