

# EPISCOPAL DIOCESE OF SAN DIEGO

## Application for License to Officiate

I hereby request that I be granted a License to Officiate in the Episcopal Diocese of San Diego.

Date \_\_\_\_\_

Order \_\_\_\_\_

Deacon or Priest

Name \_\_\_\_\_

Street \_\_\_\_\_

Cell phone \_\_\_\_\_

City \_\_\_\_\_

Other phone \_\_\_\_\_

Zip \_\_\_\_\_

Email \_\_\_\_\_

Canonical Residence \_\_\_\_\_

Church Where Attending \_\_\_\_\_

Sponsoring Church or Institution \_\_\_\_\_

Sponsoring Clergy or Institution Head \_\_\_\_\_

Location of Proposed Ministry \_\_\_\_\_

Briefly describe proposed ministry \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

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### Rector/Vicar Recommendation

I endorse the above named clergy's application to be licensed to officiate in the Episcopal Diocese of San Diego.

Name \_\_\_\_\_

Church or Institution \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_