THE DIOCESE OF SOUTH CAROLINA

APPLICATION FOR RENEWAL OF LICENSE TO OFFICIATE
FOR SERVICE IN THE EPISCOPAL CHURCH IN SOUTH CAROLINA

Please complete in full to help us make sure your information is up to date:

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell: _____ Work: _____

Email: _____

Canonical Diocese: _____

Bishop: _____

Date of Birth: _____ Spouse/Partner Name: _____

✞ As a priest I am interested in : ◯ Supply work (occasional Sunday services)
◯ Interim ministry (more regular service)

✞ For supply/interim work, I am willing to travel approximately _____ miles

Do you have Interim training?
_____

It is my desire to have my license to officiate renewed in The Episcopal Church in South Carolina.

Signature : Date:

Office Use Only:
Renewal Issued: *Date of Issue:*
Letter mailed: *Date of Expiration:*

PO BOX 20485 • CHARLESTON, SC 29413 • (843) 259-2016