**The Episcopal Church in South Carolina**

PO Box 20485

Charleston, SC 29413

# 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:

Work: \_ Cell:

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