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EXPRESSION OF INTEREST FORM

(It is important that this EOI form is completed. A Curriculum Vitae is not an acceptable substitute. Please use black ink or send electronically)

What you write and how you write it will help those making the appointment build up a picture of you. You will want to outline how you meet each of the elements of the person specification, drawing on gifts, skills, knowledge and experience from your previous career, both before and after ordination, responsibilities held and relevant interests. You will also want to set out your thoughts about how you will take forward some of the challenges and issues set out in the role specification.

SECTION 1: Position applying for: Surname: Title: **Christian Names in full: Preferred Name: Permanent Address: Temporary Address:** To From **Telephone Nos: Telephone Nos:** Home: **Temporary Home:** Other: Mobile: May we telephone you on any of these nos? Please indicate which? E-mail: Ordained Deacon in the Diocese of in (year) Ordained Priest in the Diocese of in (year)

SECTION 2: PRE-ORDINATION							
University/College & Other Furth			g Theological College or Course).				
Please give qualification obtained	, with class if de	gree.					
Name	From	То	Qualifications Experience:				
Membership of Professional Organisations and Other Professional/Practical Qualifications Obtained:							
Name:	From:	То:	Qualifications / Experience				

Closing date for Applications:

SECTION 3: EMPLOYMENT BEFORE ORDINATION Please give a short indication, in chronological order, the nature of previous work and responsibilities. **Dates** To: Position held & Brief Description of Responsibilities **Reasons for Leaving** From: **SECTION 4: MINISTRY SINCE ORDINATION Posts held since Ordination** (full and part time, including present appointment) Please list these carefully, with dates in chronological order, with separate entries for posts held concurrently (e.g. Area Dean, Chaplaincies etc). From: To: **Post & Description** Responsibilities in the Diocese and Wider Church Please indicate, with dates, tasks undertaken for the diocese and wider church (e.g. Synodical responsibilities at any level, diocesan committees and working parties served on, ecumenical involvement, or work for a church voluntary organization To: From: **Description:**

Continuing Ministerial Training
Please list training courses attended
Church Tradition
What theological traditions have shaped your ministry? With which do you feel most at ease today?
If the office applied for is in a different church tradition from the one you have come from give examples of
how you have worked across traditions
Are you a supporter of GAFCON Australia?

SECTION 5:
Responsibilities in the Community
Please list tasks undertaken e.g. school governor
Other Areas of Interest
Please indicate special areas of concern, particular issues in contemporary life, international matters,
academic or artistic interests, hobbies.

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SECTION 6: INFORMATION IN SUPPORT OF YOUR APPLICATION

Please state your reasons for applying for this post, saying					
a) b) c)	what appeals to you about it what you think you might bring to it, and how you might respond to any issues raised by the Parish Profile and Statement of Needs				
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Why do yo	u have it in mind to leave your current post?				

SECTION 7: REFERENCES

Please give the name, full address and e-mail address of those from whom references can be requested. **NB.** You must supply the name of the Bishop whom you serve. If you have a Bishop who is not your Diocesan Bishop, please explain who and why.

Please ensure that your referees are aware of this application. If you are providing us with their e-mail address, please obtain your referees' permission.

Please give names and addresses of three persons to whom references can be made. At least one should be clerical and one lay. Please obtain their permission.
Episcopal Referee:
Name:
Address:
Job Title:
E-mail:
Telephone No:
Lay Person in your congregation:
Name:
Address:
Job Title:
E-mail:
Telephone No:
Clerical Referee:
Name:
Address:
Job Title:
E-mail: Telephone No:

To the best of my knowledge and belief, the information supplied by me on each section of this form is correct.

I hereby consent to the processing of sensitive personal material, as defined in the Data Protection Act 1998, involved in the consideration of this application

Signed Date

PERSONAL DETAILS

This section will be detached from the form as it contains information that is strictly private and confidential. Unless you give explicit permission, it will not be seen by any members of staff, other than the Archbishop Bishop's and Regional Bishops' offices					
Single	Married 🗌	Widowed 🗌	Separated	Divorced Remarried	
Married to partner who has been divorced					
Your Family					
(i) Spouse					
Christian Nam	es:				
(ii) Children					
Christian Nam	es		date of b	irth (optional)	

Position applied for:	
Family Name: (block capitals)	Title:
Other Names in full: (block capitals)	Preferred Name:
Nationality What is your nationality and citizenship?	
Are you an Australian Citizen?	
If Yes, please attach a photocopy of your passport or, if If No, please attach a photocopy of any permission you I	
Health Please specify any special access requirements you may system?	have in order to attend interview e.g. deaf loop
Do you have any health related condition that would aff intrinsic to the office? (See person specification for details)	
With very limited exceptions, appointment to an ecclesian of 70. Are you under the age of 70?	stical office cannot be offered to anyone over the age
Are you aware of any police enquiries undertaken followi on your suitability for this post?	ng allegations against you, which may have a bearing
Where did you hear of this office?	
If appointed when would you be available to start?	
I certify the information given in this application is correc	t.
Signature	Date