DISCERNING ORDAINED VOCATION 1

APPLICATION FORM D.1

Please answer all questions fully even if you have provided some of this information before and type all your responses.

Please return this form to [candidates@methodistchurch.org.uk](mailto:candidates@methodistchurch.org.uk) by the deadline outlined in document G.9 (Dates and Deadlines for DOV1 and DOV2).

If you continue into candidating, this form will be taken forward, and you will also be asked to complete a further application form which will not repeat these questions but will ask for some additional information.

Your completed form will be seen by the DOV1 Advisory Group and, if you continue into DOV2 (candidating), this form will also be seen by the DOV2 Connexional Committee.

SECTION 1

Personal Details

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| These details will be used to contact you during the candidating process (if you candidate) so please ensure you supply a telephone number and email address that will be monitored during the year. | |
| Title (Mr, Ms, Mrs, Miss, Dr, or another title) |  |
| Preferred pronouns  (They/Them, He/Him, She/Her, other – please state or prefer not to say) |  |
| Surname |  |
| Christian name |  |
| Middle name(s) if any |  |
| The name by which you prefer to be called |  |
| Any former name(s) by which you have been officially known |  |
| The dates when you used your former name(s) |  |
| Date of birth (DD/MM/YYYY) |  |
| Address and postcode |  |
| Telephone number  *Please ensure you give numbers on which you can be contacted* | Home |
| Work |
| Mobile |
| Email address |  |
| If you have any medical condition or disability which may require us to make adjustments to how we carry out DOV1 and DOV2, please state them below and indicate the kind of adjustments you require. This might relate particularly to mobility or dietary needs or access to documents.  It is your responsibility to make us aware of these needs. | |
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Church life

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| The date of your baptism |  |
| The place of your baptism |  |
| The date of your confirmation |  |
| The place of your confirmation |  |
| The date when you became a member of a Methodist church in Britain |  |
| The name of the Methodist church where your membership is currently held  You need to be a member for at least the last year (up to September) before you can begin candidating. |  |
| The name and number of your Circuit and District |  |
| The name of the church, fellowship or Christian community you most regularly attend for worship |  |
| The address of this church, fellowship or Christian community |  |
| The date you first started worshipping there |  |
| The name of the leader or minister of this church, fellowship or Christian community |  |
| The email address of the leader |  |
| Have you discussed your interest in candidating with this leader? |  |
| Please enclose a letter from this leader supporting your application and confirming that you are a member of a Methodist church | |
| Please list below any roles you currently hold in your church, fellowship or Christian community and the length of time you have held those roles. If you are a local preacher or worship leader please indicate when you started the course and how much of it you have completed. | |
| Role | Length of time |
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| Please list any roles you have previously held in your church, fellowship or Christian community. | |
| Role | Dates held |
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| Please list any training or development courses you have attended in the life of your church, fellowship or Christian community. | |
| Name of course | Duration and dates attended |
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Education and employment

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| Your formal education after the age of 14.  Please include below details of the award, grade and subject in each case.  Please list these in chronological order beginning with the earliest  Please add lines as necessary | | | | | | |
| Dates | | Institution | | | | Award |
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| Other education / training undertaken in the last 5 years. Please add lines as necessary | | | | | | |
| Dates | | Institution | | | | Award |
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| Employment history for the last 10 years starting with your current employment.  Please explain any gaps in employment.  Please add lines as necessary  If you are not employed, or were not employed for a period, please state that you are or were not employed. | | | | | | |
| Employer | Position and brief explanation of role | | Start date | End date | Reason for leaving | |
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Safeguarding

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| All leadership roles in the Methodist church require safeguarding training and DBS checks. If you have never had a DBS check carried out, please ask the leader of your church, fellowship or Christian community to help you to do this before you submit this form. | | |
| Please list the dates of any safeguarding training you have undertaken, whether it was the foundation or advanced level and whether it was run by the Methodist Church or another organisation | | |
| Date | Level | Run by |
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| Please state the date of your most recent DBS and please attach the certificate when you return this form | | |
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Accompanist

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| All applicants will be matched with an accompanist who will travel on the journey alongside you and help you to reflect on the experience. In order to help us to find the right person to accompany you, please provide the following information. Please note that every effort will be made to make good matches, but it cannot be guaranteed that all elements of all requests can be met. |
| Have you already been working with an accompanist through ‘Explore’ who you have both agreed will continue to be your accompanist through your candidating process? |
| *If ‘yes’ – you do not need to complete the rest of this section.* |
| What qualities would you value in an accompanist in order to help you the most?  *For example, some people who are quite shy might appreciate an accompanist who can help them to speak out. Others who find it hard to make decisions might appreciate an accompanist who is prepared to challenge them.* |
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| Is there anything specific you feel your accompanist should be aware of?  *This might be a learning need or condition, a situation in your family, something from your past experience or a health condition.* |
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| What is your preferred format of meeting (face to face or on video conferencing)? |
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| Are there any reasonable adjustments that you require which would help your learning?  *For example, mobility, large print, sign language, different coloured paper, a maximum length of sessions.* |
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| Please indicate the maximum distance you would be prepared to travel to meet with your accompanist. Please indicate the restrictions that would prevent you from travelling further. |
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Equal opportunities

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| In order to monitor the effectiveness of our Equal Opportunities Policy, we ask all applicants to complete the Equalities and Diversity Monitoring form D.2. Please include this with your application. |

Declarations

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| I declare that I wish to begin Discerning Ordained Vocation 1 and I have completed all areas of this application form | | |
| Your signature |  | |
| *When signing please scan in (or add a photograph of) your actual signature. We cannot accept a typed name in place of a signature.* | | |
| Date |  | |
| Checklist of documents accompanying your application. Please tick to indicate that you have submitted these documents | Letter from church leader stating that they support your application and confirming that you are a member of the Methodist Church and have been for the last year (up to September) |  |
| Evidence of your baptism  *Please send a photo of either your baptism certificate or a book plate from a book you were given at the time, or a copy of the church’s baptism records. Your local minister might be able to help you to contact the church where you were baptised if you do not have these records yourself.* |  |
| Evidence of your church membership  *Please send a scan or photo of your membership card from the last year. If you do not have this, please ask your church leader to explain this in their letter.* |  |
| DBS certificate |  |
| D.2 Equalities and Diversity monitoring form |  |
| Privacy Notice  The information that you provide on this form and within other data collection documents including your online DBS application form, will be used to process your application’. We process this information in line with our privacy policy. After DOV1, if you offer as a candidate for ordained ministry, the information will be used in the administration of your candidature.  By signing this application form we will be assuming that you agree to the processing of your personal data (as described above), in compliance with General Data Protection Regulation.  If you would like further information, please read our privacy policy: [Privacy and cookie policy (methodist.org.uk)](https://www.methodist.org.uk/privacy-and-cookie-policy/) | | |