

Holy Cross

permanent diaconate program

PROGRAM DESCRIPTION

The Permanent Diaconate Program is an educational and formational initiative of the Holy Eparchial Synod of the Greek Orthodox Archdiocese of America and Holy Cross Greek Orthodox School of Theology.

The faculty of Holy Cross offers two summer educational sessions each August. The Permanent Diaconate Program is a three-year educational program, but students may take up to four years to complete the program. Students may choose to enroll in both or only one of the summer sessions in any given year but participation in a total of six one-week sessions is required for completion of the program. Admission into the Permanent Diaconate Program is a prerequisite for participation in the summer educational sessions. The program consists of three main components:

- (1) six one-week summer educational sessions held on the campus of Holy Cross;
- (2) affiliation with a metropolis clergy mentor and participation in a local parish setting throughout the duration of the program to be determined by the local Metropolitan; and
- (3) participation in Metropolis-based cluster groups to reinforce and enhance students' understanding of core topics and skill proficiency along with the writing of papers based on personal readings supervised by the faculty of Holy Cross.

Each Metropolitan of the Greek Orthodox Archdiocese of America serves as overseer for the students enrolled in the Permanent Diaconate Program who reside within his Metropolis.

Persons from other jurisdictions may apply to participate in this program.

The deadline for registration is July 15th.

GENERAL REQUIREMENTS

All of the following are taken into consideration in judging qualifications for admission.

- Completed Application form
- \$50 Application Fee
- Bachelor's Degree or its equivalent
- Current Resume
- Letter of recommendation from one's Metropolitan including the name of a local clergyman who will serve as mentor
- Priest's Recommendation

Once application materials are submitted to Holy Cross, they become the permanent record of Holy Cross and may not be returned to the applicant.

Completed applications for the Permanent Diaconate Program should be sent to the Office of Admissions at Holy Cross. Students should acknowledge in their application whether they will be participating in this summer's educational sessions. Students who cannot participate in this year's summer sessions are still encouraged to complete an application for the Permanent Diaconate Program.

Admission into and successful completion of the Permanent Diaconate Program is not a guarantee of future ordination. In the Greek Orthodox Archdiocese, candidates for ordination are determined by the local Metropolitan who forwards a recommendation to the Archbishop. Upon successful completion of the program, students will receive a Certificate of Study. Those considering studying for the holy priesthood should apply for the Master of Divinity degree program at Holy Cross.

WORK EXPERIENCE

List any job (including summer employment) that you have held during the past five years.

Specific nature of work	Employer	Dates of employment	Number of hours per week

CHURCH INFORMATION

Orthodox Jurisdiction: _____ Other: _____

Home Parish: _____ City, State: _____

Parish Priest: _____ Metropolis/Diocese: _____

Have you consulted with you parish priest about entering the PDP? Yes No

Have you consulted with your hierarch about entering the PDP? Yes No

Date of Reception into the Orthodox Church: _____ By Baptism By Chrismation Other _____

Parish, City, State of Reception _____

Have you been affiliated with another church or religion?

No Yes _____

Have you ever taken a vow or promise in a religious order or institution?

No Yes _____

Are you aware of any canonical impediments to your future ordination as a deacon?

No Yes _____

FAMILY INFORMATION

Mother's full name: _____

Father's full name: _____

Is she still living? _____

Is he still living? _____

Home address, if different from yours: _____

Home address, if different from yours: _____

Occupation: _____

Occupation: _____

If not with both parents, with whom do you make your permanent home? _____

Please check if your parents are Married Divorced Separated Other _____

CERTIFICATION

"I certify that the information provided on this application is accurate, complete, and honestly presented. I understand that any inaccurate or misleading information or omission will be cause for disqualification from further consideration for admission and will be cause for the resinding of any offer of admission, or for discipline, dismissal, or revocation of degree if discovered at a later date."

Signature

Date

Priest's Recommendation

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**Holy Cross
Greek Orthodox
School of Theology**
50 Goddard Avenue
Brookline, MA 02445

Toll Free 866-424-2338
Tel. 617-850-1260
Fax. 617-850-1460
www.hchc.edu
admissions@hchc.edu

TO THE APPLICANT

Please fill in the information requested below and give this form to your parish priest or another clergyman who knows you well. Including a stamped, addressed envelope will make it easier for him to help you.

Name: _____

Application to the Permenant Diaconate Program:

This information will become part of your admissions file. The purpose of this recommendation is to assist in making the admission decision and, if you are admitted and enrolled, to aid in advising and otherwise assisting you. It will not be disclosed to any unauthorized individual without your consent. Under the provisions of the Family Educational Rights and Privacy Act of 1974, you have the right, if you enroll in the Program, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please check the appropriate box indicating whether or not you wish to waive this right and sign your name.

waive **do not waive any right of access that I may have to this recommendation form.**

Applicant's Signature: _____ Date: _____

TO THE PRIEST

In selecting students, the Admissions Committee depends very much on evaluations of the applicants supplied by persons who know them well. We are eager to select those individuals whose accomplishments, personal attributes, and abilities indicate that they have the greatest potential for service to Church and community. Therefore, we ask you to provide a thoughtful and *completely frank* appraisal of the applicant. We very much appreciate the thoughtfulness, thoroughness, and time you will devote to this evaluation. Please be assured that the School is grateful for your assistance in the evaluation and selection of future Church leaders.

Sincerely,

Admissions Department

How long have you known the applicant? _____

In what capacity have you been associated with the applicant? _____

How well do you know the applicant? _____

Recommender's Signature: _____ Date: _____

Name (please print): _____ Title: _____

Parish/Church: _____ Phone Number: _____

Address: _____

This recommendation is an important factor in the admission decision; the Admissions Committee expects it to be completed only by the recommending individual who has signed above.

For the following, please check as many choices as pertain to the applicant.

Commitment and Character

- Above reproach
- Undeveloped in certain areas
- Obvious to others
- Questionable
- No basis for judging

Parish Involvement

- Serves in leadership
- Attends frequently
- Attends occasionally
- Invested in the life of the Church
- No basis for judging

Capacity for leadership

- Demonstrates leadership abilities
- Lacks leadership ability
- Potential for leadership
- Authoritarian, can be harsh
- Respected leader
- Avoids leadership responsibility
- No basis for judging

Communication Skills

- Articulate, effective communicator
- Difficulty in expressing ideas
- Insecure
- Comprehends well
- Argumentative
- No basis for judging

Reasoning and Decision Making Ability

- Insightful, well thought-out
- Impetuous, acts without thinking
- Seeks the counsel of others
- Disregards sound advice
- Displays wisdom
- No basis for judging

Motivation and Perseverance

- Highly motivated
- Easily distracted/discouraged
- Demonstrates persistence
- Lacks resolve/determination
- Easily swayed by circumstances
- No basis for judging

Emotional Maturity and Stability

- Accurate self-appraisal
- Insecure, poor self-image
- Prone to anger
- Exercises self-control
- Prone to depression
- Demonstrates emotional stability
- Emotionally unstable
- No basis for judging

Facility in Interpersonal Relationships

- Approachable, sought by others
- Avoided by others
- Tolerated by others
- Initiative, seeks out others
- Withdrawn, avoids others
- Inappropriate in mixed settings
- Difficulty maintaining relationships
- No basis for judging

Sensitivity to Others

- Responsive to the needs of others
- Insensitive to the feelings of others
- Compassionate, caring
- Impatient with others
- Intolerant to opposition
- Encouraging
- No basis for judging

Responsibility

- Dependable
- Irresponsible, careless
- Avoids responsibility
- Completes work in a timely manner
- Difficulty in managing personal finances
- No basis for judging

Cooperation (ability to work with others)

- Works well with others
- Intimidated in group settings
- Shares responsibility
- Dominates in group settings
- Does not work well with different personalities and temperaments
- No basis for judging

What do you consider to be the applicant's strengths? _____

What do you feel would be the applicant's greatest contribution to the Program? _____

What do you consider to be the applicant's weaknesses? _____

What do you feel would be the applicant's greatest difficulty at the Program? _____

Please assess the applicant's potential for academic work. _____

Would you accept this person as a deacon in your parish?

- Very Eagerly Gladly With Some Reservations No Comment

Please check your overall evaluation of this applicant for the Program:

- Outstanding Candidate Excellent Candidate Very Good Candidate
 Good Candidate Fair Candidate Poor Candidate No Comment

Hierarch's Evaluation

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TO THE APPLICANT

Please fill out the section below for your metropolitan's information; we suggest having your priest forward his recommendation as well. Contact the local metropolis to arrange for your metropolitan's to complete the form and return it to the Office of Admissions. Often a hierarch will want to meet with you personally as part of the process. As always, it is a courtesy to include a stamped, addressed envelope.

Name: _____ Nameday: _____ Age: _____

Home Parish: _____

Present Occupation: _____ How long: _____

Marital Status:

Single Married Separated Divorced Widowed Other _____

Spouse's name: _____ Occupation: _____

Children (names/ages) _____

Parish Activities / Involvement (indicate length of involvement):

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> GOYA | <input type="checkbox"/> YAL | <input type="checkbox"/> Parish Athletics | <input type="checkbox"/> Dance Troupe |
| <input type="checkbox"/> AHEPA / Daughters | <input type="checkbox"/> Choir | <input type="checkbox"/> Chanting | <input type="checkbox"/> Sunday School Teacher |
| <input type="checkbox"/> Parish Council | <input type="checkbox"/> Youth Group Sponsor | <input type="checkbox"/> Greek School Teacher | |
| <input type="checkbox"/> Altarboy | <input type="checkbox"/> Tonsured Reader | <input type="checkbox"/> Other | |

This information will become part of your admissions file. The purpose of this recommendation is to assist in making the admission decision and, if you are admitted and enrolled, to aid in advising and otherwise assisting you. It will not be disclosed to any unauthorized individual without your consent. Under the provisions of the Family Educational Rights and Privacy Act of 1974, you have the right, if you enroll in the Program, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please check the appropriate box indicating whether or not you wish to waive this right and sign your name.

I waive do not waive any right of access that I may have to this recommendation form.

Applicant's Signature: _____ Date: _____

TO THE HIERARCH

The person presenting you this form is applying for admission to Holy Cross with the intent of preparing to serve the Orthodox Church. In conformity with traditional practice, episcopal approval must be obtained before beginning studies for Church service. We very much appreciate the thoughtfulness, thoroughness, and time you will devote to this evaluation. Please be assured that the School is grateful for your ongoing assistance in the selection and formation of future Church leaders.

Respectfully,
Admissions Department

How long have you known the applicant? _____

How well do you know the applicant?

- I know the applicant very well. I know the applicant well enough. I am familiar with the applicant.
 I have met the applicant for the first time during this process. I do not recall ever having met the applicant.

In the space provided, kindly describe your overall impression of the suitability of this applicant for theological studies leading to ecclesiastical service. Please include comments on both the applicant's personal assets or positive features and possible liabilities or handicaps as a potential Church leader. Please use additional sheets if desired.

How do you respond to the applicant's desire enter the Permanent Diaconate Program leading to Church service?

- The applicant has my blessing.
 The applicant does not have my blessing.

MENTOR ASSIGNMENT

Mentor Priest's Name: _____

Mentor Priest's Parish: _____

City/State: _____ Phone #: _____

Hierarch's Signature: _____ Date: _____

Hierarch's Name (please print): _____

Metropolis: _____ Phone Number: _____