



**Petition to the Bishop for consent to officiate
at a marriage after divorce, annulment, or dissolution**

Please complete and send to the Bishop's attention at *Episcopal Church in Minnesota, 1101 W Broadway Ave, Minneapolis, MN 55411* all three pages of this petition and the appropriate Bishop's Consent Form prior to confirming a date for the service of Holy Matrimony or Holy Union and at least 30 days before a proposed date.

Petition submitted by:

The Rev. _____ Date: _____

Address: _____

Email: _____ Tel: _____

To the Bishop:

I hereby petition for consent to officiate at the Marriage of [answer (a), and either (b) or (c)]

(a) Name _____

This will be the _____ (1st, 2nd, etc.) Marriage or Civil Marriage for _____ whose prior Marriage(s) or Civil Union(s) ended in divorce, annulment, or was dissolved by a Civil Court on _____ [month(s) and year(s)].

and

(b) Name _____

This will be the _____ (1st, 2nd, etc.) Marriage or Civil Marriage for _____ whose prior Marriage(s) or Civil Union(s) ended in divorce, annulment, or was dissolved by a Civil Court on _____ [month(s) and year(s)].

or

(c) Name _____

who was ___ not previously married or in a Civil Marriage or ___ is a widow or widower.

Please circle "Yes" or "No" to every statement. Where "No" is indicated, an explanation must be attached.

- | | | |
|-----|----|---|
| Yes | No | 1. I met in person with both persons and they are engaged in preparation with me, or they have met in person with a priest of this Church satisfactory to me and I have received assurance from him or her that they have completed a program of preparation. |
| Yes | No | 2. Each person has signed the appropriate Declaration of Intention. |
| Yes | No | 3. At least one of the persons is baptized and involved in the life of the church. |
| Yes | No | 4. I inquired of the persons whether they have consulted any other priest of this Church regarding the proposed Marriage or Civil Marriage, and if they have, I have personally communicated with that priest prior to submitting this petition. |
| Yes | No | 5. I personally examined the final decree(s) of divorce, annulment, or dissolution and I certify that on the basis of my examination, the prior Marriage(s) or Civil Marriage(s) is/are lawfully dissolved. |
| Yes | No | 6. I believe these persons intend to establish a Christian Marriage or Civil Marriage. |
| Yes | No | 7. In the preparation sessions, the couple discussed their readiness for this Marriage or Civil Marriage. |
| Yes | No | 8. I believe that each person has realistically faced and evaluated the reasons for the dissolution of prior Marriage(s) or Civil Marriage (s). |
| Yes | No | 9. I believe that each person has an adequate continuing concern for any prior spouse(s) or partner(s) and for any children of their prior Marriage(s) or Civil Marriage (s). |
| Yes | No | 10. I believe that the couple (or at least one person with the support of the other) intends to live out their Marriage or Civil Marriage within a congregation of a Christian Church. |
| Yes | No | 11. As far as I can determine, all matters of property and custody settlements resulting from dissolution of prior Marriage(s) or Civil Marriage(s) have been settled. |
| Yes | No | 12. This request for consent complies with the requirement for thirty days notice prior to the Marriage or Civil Marriage. |
| Yes | No | 13. I am willing to officiate at this Marriage or Civil Marriage. |

If one or both persons have been divorced, had a Marriage annulled, or had a Civil Marriage dissolved more than once, I have:

Yes No Attached a letter explaining the matter and describing the process of preparation for this Marriage or Civil Marriage.

Yes No Attached a letter from a licensed therapist or have arranged for such a letter to be mailed directly to the Bishop.

Proposed date of this Marriage or Civil Marriage: _____

Proposed location: _____

Signature clergy person submitting this petition



Declaration of Intention for Marriage

We,

and

understand the teaching of the church that God's purpose for our marriage is for our mutual joy, for the help and comfort we will give to each other in prosperity and adversity, and, when it is God's will, for the gift and heritage of children and their nurture in the knowledge of God. We also understand that our marriage is to be unconditional, mutual, exclusive, faithful and lifelong; and we engage to make the utmost effort to accept these gifts and fulfill these duties, with the help of God and the support of our community.

Signature

Signature

Dated

FOR HOLY MATRIMONY

*****NOTE*** Clergy to complete all areas of this form except where Bishop signs and dates*****

**Episcopal Church in Minnesota
1101 W Broadway Ave
Minneapolis, MN 55411**

**BISHOP'S CONSENT TO BE MARRIED BY A MINISTER OF
THE EPISCOPAL CHURCH**

Acting under the provisions of Title I, Canons 18 and 19, and to fulfill the requirements of Canon 19, Sec. 3. (c), I hereby grant consent to the marriage of:

Name: _____

Address: _____

whose prior marriage was dissolved by a civil court, the final decree(s)

having been entered on _____;
[Month(s)/Year(s)]

And,

Name: _____

Address: _____

whose prior marriage was dissolved by a civil court, the final decree(s)

having been entered on _____;
[Month(s)/Year(s), if applicable]

~~~~~  
This signed Consent Certificate shall constitute permission for  
The Reverend \_\_\_\_\_ to officiate at the marriage of the above-  
named persons on the date: \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
Bishop

*Following the marriage, please complete and return the enclosed notification form (Minister's Marriage Report) to the Bishop's Office.*

**TO: THE BISHOP**

**Episcopal Church in Minnesota  
1101 W Broadway Ave  
Minneapolis, MN 55411**

**MINISTER'S MARRIAGE REPORT**

I hereby certify that, having received permission under Title I, Canon 19 of the Canons of the Episcopal Church, I solemnized the marriage of

\_\_\_\_\_

AND

\_\_\_\_\_

IN \_\_\_\_\_  
(Church or Other)

\_\_\_\_\_  
(Place)

in the Episcopal Church of Minnesota on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_.

\_\_\_\_\_  
OFFICIATING MINISTER/PRIEST

\_\_\_\_\_  
Address

\_\_\_\_\_

\_\_\_\_\_  
Date

(Please complete this form and return to the Bishop's office immediately following the liturgy.)

