

The Diocese of the Arctic
ARTHUR TURNER TRAINING SCHOOL

PO Box 11349

Iqaluit, NU

X0A 1H0

attsdirector@gmail.com



Arthur Turner Training School (ATTS)
APPLICATION FORM

Instructions:

Please read through all the questions before answering them.

Please answer all questions in English.

When you and your spouse have completed your sections, please give the forms to the minister of your parish so he/she can complete his/her section. Once that is complete and returned to you, you are then responsible to send it on to the Director of ATTS through either Canada Post or through email (address is listed above).

Please give the letter at the end of this form to your local doctor or nurse. You are also responsible to include a vulnerable sector criminal record check with this application (can be obtained from the RCMP).

The information in this application form will be kept confidential, being seen only by those involved in the application process.

Personal Information:

Please Complete the form fully. Please write clearly.

Full Name:

Previous Name (if changed):

Street/PO Box:

Community:

Province/Territory:

Postal Code:

Phone Number:

Social Insurance Number:

Health Care Number:

Date of Birth:

Birthplace:

Date of Baptism:

Where were you baptized?

By whom were you baptized?

Date of Confirmation:

Where were you confirmed?

By whom were you confirmed?

For Married Applicants:

Date of Marriage:

Place of Marriage:

Full Name of Spouse:

Previous Name of Spouse (if changed):

For Applications with Dependents

Name(s) of Child(ren)

Age(s)

Grade in School

Do you have responsibilities to support others? Who do you have to support?

Please describe the nature of your responsibilities to this person.

Educational Information:

Highest grade level completed (1 to 12):

Date completed:

Please list the schools you attended, including dates:

What was the most recent educational institution you attended?

- Elementary
- Vocational Training
- University
- Vocational Centre
- High School
- Technical College
- College
- Other (please specify)

Name of Education Institution(s):

Location of Education Institution(s):

Date Completed:

Employment Information:

Please list the jobs you have done:

Employer	Type of Work	Start Date	End Date
----------	--------------	------------	----------

Background Information:

What is your ancestry?

- Inuit
- Inuvialuit
- Inuinnait
- Other (please specify)
- Dene
- Non-Status Indian
- Metis

What language(s) do you speak?

What language(s) do you read/write?

Do you realize that teaching at ATTS will be primarily in English?

- Yes
- No

Spiritual Journey:

Below, please tell us about your background, including how you became a Christian. Also include why you believe yourself to be called to ministry in the Diocese of the Arctic. (You may use the back of the page if needed)

Ministry Experience

What work have you done in your local church and for how long? (youth, Sunday School, music, vestry, etc)

Please describe what you think the work of a minister is.

Financial Information:

When you come to school, will you have outstanding debts?
How much?

Have you had any previous grants, bursaries or loans to help with education?
If so, please list type of help, start date, end date and amount.

Do you realize that you will only have a small allowance to live on while attending ATTS?
Will you be satisfied living on a small allowance?

Other Information:

Will you be satisfied being able to return to your home community at most once per year?

Have you had any struggles (alcohol abuse, illegal drug use, gambling, etc) that could hinder your ministry? If so, please write about it, describing how you have dealt with these issues in the past and indicate how you plan on resisting temptation while in a new community.

Spouse Information

This section is to be completed by the spouse of the applicant.

Full Name:

Previous Name (if changed):

Street/PO Box:

Community:

Province/Territory:

Postal Code:

Phone Number:

Social Insurance Number:

Health Care Number:

Date of Birth:

Birthplace:

Date of Baptism:

Where were you baptized?

By whom were you baptized?

Date of Confirmation:

Where were you confirmed?

By whom were you confirmed?

What is your ancestry?

Inuit

Dene

Inuvialuit

Non-Status Indian

Inuinait

Metis

Other (please specify)

What language(s) do you speak?

What language(s) do you read/write?

Dependents:

Name(s) of Child(ren)

Age(s)

Grade in School

Do you have responsibilities to support others? Who do you have to support?

Please describe the nature of your responsibilities to this person/these people.

Spiritual Journey - Spouse

Below, please tell us about your background, including how you became a Christian.

Ministry Experience - Spouse

What work have you done in your local church and for how long? (youth, Sunday School, music, vestry, etc)

Please describe what you think the work of a minister is.

Other Information - Spouse

Do you support your spouse in his/her desire to train at ATTS? Yes No

How do you understand the role of a minister's spouse?

Do you realize that your spouse will only have a small allowance to live on while attending ATTS?
 Yes No

Will you be satisfied living on this small allowance?
 Yes No

Will you be satisfied being able to return to your home community at most once per year?
 Yes No

If your spouse is ordained after completing the course, are you willing to serve with him/her in any part of the Diocese that the Bishop wishes to send you, even if it is among people who are different from you?
 Yes No

Have you had any struggles (alcohol abuse, illegal drug use, gambling, etc) that could hinder your ministry? If so, please write about it, describing how you have dealt with these issues in the past and indicate how you plan on resisting temptation while in a new community.

Minister Reference:

This section is to be completed by the applicant's licensed minister.

Please note this application is confidential and is not to be discussed with the student and spouse. Your answers will only be seen by those involved in the application process.

Have you read the student's application?: Yes No

Have you read the spouse's application?: Yes No

To be the best of your knowledge, is the information in this application accurate? Yes No

If your answer is no, please indicate where there is disagreement:

Do you think this applicant is suitable for training at ATTS with a view to being ordained to ministry in the Anglican Church of Canada?

Please describe why or why not.

Do you think the applicant's spouse will be a help or hindrance in training and ministry?

Date:

Signature of Minister:

The Diocese of the Arctic
ARTHUR TURNER TRAINING SCHOOL

PO Box 11349

Iqaluit, NU

X0A 1H0

attsdirector@gmail.com



To Whom It May Concern,

The person who gives you this letter and his/her spouse are applying to attend a two year course at the Arthur Turner Training School in Iqaluit, Nunavut with a view to being ordained for ministry in the Anglican Church of Canada.

In order to admit the applicant, we need to ensure that he/she and his/her spouse is in adequate health to complete the course and perform the duties of a church minister in a northern community. We are not seeking a detailed medical examination, but only a professional opinion on the applicant's overall health and the overall health and his/her spouse.

Your comments will be confidential, being seen only by those involved in the student's application. Please send your comments to the Director of Arthur Turner Training School, to the address written above.

Thank you in advance for your help in this matter.

A handwritten signature in black ink that reads "Joey Royal". The signature is written in a cursive, slightly stylized font.

The Rev'd Joey Royal
Director -Arthur Turner Training School
Iqaluit, Nunavut