**ORDINATION APPLICATION FORM**

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| SPIRIT OF THE LOTUS  1015 JEFFERSON STREET, SANTA CLARA, CA 95050 · (408) 249-3135  Spiritofthelotus.com · facebook.com/spiritofthelotus |
| You are now being called to walk the Path of your Divine Destiny. The Spirit of the Lotus Church and School of Wisdom will help prepare you to understand the vastness of your purpose and to pierce the world of illusion, glamor and maya so that you can better serve God and humanity. The Ministers’ Program is a six-month course where students meet once per week. Ordination of ministers is during the Summer Retreat on the Spirit of the Lotus land in Belen, New Mexico. |

**DATE: TBD (April through October)**

**WHERE: Spirit of the Lotus Church & School of Wisdom**

**1015 Jefferson Street**

**Santa Clara, CA 95050**

**CLASSES WILL BE LIVE STREAMED**

**FEE: Classes & Materials including the following: $1,500**

**Ordination**

**Spirit of the Lotus Minister’s Stole (Received during the Ordination)**

**Ministers’ Handbook (Received after the Ordination)**

**REQUIREMENTS: Must attend church services, classes and retreats on a regular basis.**

**Have a sincere heart.**

**BENEFITS OF BEING A SPIRIT OF THE LOTUS MINISTER:**

* Perform wedding ceremonies, baptisms, funerals and blessings
* Conduct religious ceremonies and rites
* Minister in hospitals, jails/prisons
* Start a Spirit of the Lotus Congregation
* Be legally recognized as a minister almost anywhere in the world
* Perform any ceremony that requires a spiritual priest or minister (with the exception of exorcisms.)

**SPIRIT OF THE LOTUS**

**ORDINATION APPLICATION FORM**

# Program Application

## Applicant Personal Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date of Birth: |  | | Location of Birth: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Marital Status: |  |
| Facebook/Skype: | |  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Would you like to give Sunday services? | YES | NO | Are you a priest/minister/pastor of any other organization? | YES | NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you committed to being a minister? | YES | NO | If yes, name of Church or organization? |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Are you willing to attend classes, retreats, Sunday services on a regular basis? | YES | NO |  |

|  |  |
| --- | --- |
| Why do you want to be a SOL minister? |  |

## References

Please list two professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |  |  |  |

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*I understand that false or misleading information in my application may result in my release from the program*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*