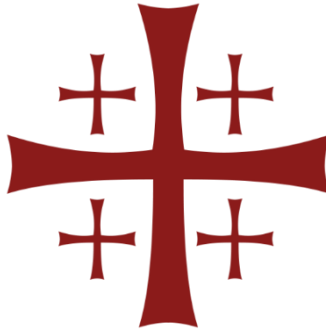


# The Anglican Diocese of South Carolina

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Post Office Box 20127 • Charleston, South Carolina 29413  
Office • 126 Coming Street • Charleston, South Carolina 29403



## APPLICATION FOR REMARRIAGE

Use the following document for applications to the Bishop for consent for remarriage.

1. **Application for re-marriage** in the church after divorce-to be completed by the priest who will preside over the nuptials.
2. **COVER LETTER:** The priest should include a cover letter with pertinent details, addressed to the Bishop.
3. **Application Form:** The priest completes the first two-page section.
4. **Testimony from Applicant(s):** Marriage applicant(s) complete(s) the separate one-page section.
5. **DIVORCE DECREE:** *A copy of the divorce decree(s) must be included.*

### **A MINIMUM OF 30 DAYS IS REQUIRED FOR SUBMISSION TO THE BISHOP OF THIS INFORMATION FOR APPROVAL.**

*Please do not send an incomplete application package. This will only caused approval delay.*

Please keep these originals to make additional copies

## The Anglican Diocese of South Carolina

Please make additional copies of this form for your needs.

### The Proposed Marriage:

1. Parish and Address: \_\_\_\_\_  
\_\_\_\_\_

2. Cleric requesting consent: \_\_\_\_\_

3. Names of Applicants:

Man: \_\_\_\_\_ Age: \_\_\_\_\_

Woman: \_\_\_\_\_ Age: \_\_\_\_\_

4. Church Membership of Applicants:

Man's Denomination: \_\_\_\_\_

Parish: \_\_\_\_\_ Active? \_\_\_\_\_

City: \_\_\_\_\_

Woman's Denomination: \_\_\_\_\_

Parish: \_\_\_\_\_ Active? \_\_\_\_\_

City: \_\_\_\_\_

5. Which of the applicants have been married before?

Groom

Bride

Both

6. Have they approached any other minister about this proposed marriage before coming to you?

\_\_\_\_\_  
If yes, give details \_\_\_\_\_

\_\_\_\_\_

7. Date of their first request to you to be married: \_\_\_\_\_

8. Date of proposed ceremony: \_\_\_\_\_

9. Date of the final decree in previous marriage(s): \_\_\_\_\_

10. Describe the nature of the pre-marital counseling you have done with the couple:

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11. What opportunities for repentance from the failure of the previous marriage(s) have been included in this counseling? \_\_\_\_\_

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12. In your opinion, is (are) the previous marriage(s) psychologically and practically ended?

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13. What factors make you think the proposed marriage will be successful?

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14. What problems do you foresee for this couple?

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15. What do you think the divorced applicant (s) has (have) learned for the previous marriage(s) which will help the proposed marriage succeed?

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16. Date of the proposed post-marital counseling with the applicants:

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Please attach a copy of the summary of the final divorce decree.

(You may want to see the complete court record to verify the facts).

CONSCIOUS OF MY RESPONSIBILITY UNDER THE CANON AND FOR THE  
CONTINUING PASTORAL CARE OF THIS COUPLE,  
I DO RECOMMEND AND REQUEST THAT YOU CONSENT  
THAT I MIGHT PERFORM THE MARRIAGE PROPOSED HEREIN.

Signature of the Priest: \_\_\_\_\_

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

**The Previous Marriage**

To be completed by the divorced person(s). One form per previous marriage.

1. Name of previous spouse: \_\_\_\_\_

2. Your age and that of your previous spouse at the time of the marriage:

Yours: \_\_\_\_\_

Your Previous Spouse: \_\_\_\_\_

3. Date of previous marriage: \_\_\_\_\_

4. Date of Divorce: \_\_\_\_\_

Please attach a copy of the summary of the final court divorce decree. The priest may want to see a copy of the court record, in order to verify the facts of the case.

5. Which party brought divorce proceedings? \_\_\_\_\_

6. On what grounds was the divorce obtained? \_\_\_\_\_

7. Were children born of the previous marriage?

How many? \_\_\_\_\_ Present ages? \_\_\_\_\_

8. Who has custody of the children and why? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Have you fulfilled all obligations to the previous marriage partner, providing for the well-being of your former spouse and any children? \_\_\_\_\_

Is there continuing financial obligation? \_\_\_\_\_

If yes, are there adequate resources to meet it as well as to care for the new family?

\_\_\_\_\_

Are all parties aware of, and satisfied with, the financial arrangements?

\_\_\_\_\_

10. Please attach a brief account of the marriage history, the circumstances leading to the divorce and how you have grown and matured from the experience.

Signature of the Applicant: \_\_\_\_\_ Date: \_\_\_\_\_