

**CALIFORNIA-ARIZONA PROVINCE OF ST. JOSEPH
SECULAR ORDER OF DISCALCED CARMELITES
COMMUNITY TO COMMUNITY
INTRA AND INTER PROVINCIAL TRANSFER REQUEST**

Central Office
California-Arizona Province
Secular Order Discalced Carmelites
P.O. Box 3079
San Jose, California 95156-3079

Central Office
Oklahoma Province
Secular Order Discalced Carmelites
315 N. Greenville Ave #1214
Allen, TX 75002

Central Office
Washington Province
Secular Order Discalced Carmelites
2131 Lincoln Road
Washington, DC 20002-1199

- Section 1 is to be completed by the Applicant and verified by the Community Council of origin.
- Section 2 is to be completed by the receiving Community Council.
- If the receiving Community Council is unable to admit the applicant, this original form will be returned to the Community Council of origin with appropriate endorsement in Section 3.
- If the applicant is admitted, a copy of this application will be sent to the Community Council of origin for their files with the date and signature of the receiving Community Council in Section 3.
- Affected Central Offices are to be notified by the President of the receiving Community Council.
- No transfer is effective until Section 3 of this form is completed. All other situations are considered to be only transfer applications in process.

----- **Section 1** -----

Name: _____ Address: _____
City: _____ State: _____ Zip code: _____
Telephone at home: () _____ at work: () _____
E-mail: _____

I hereby request transfer to the Community* of: _____
for the following reason(s): _____

At present I am a member of the _____ Community in
_____ of the _____ Province.
(city and state where the community meets) *(name of province)*

President: _____ Address: _____
(community of origin)
City, state, zip: _____
E-mail: _____ Telephone: _____

*Transfers from or to a Recognized Group must be made with the Provincial Delegates permission.
(please turn over)

Formation Director: _____ Address: _____
(community of origin)
City, state, zip: _____
E-mail: _____ Telephone: _____

My current status is (check all that apply/have applied and provide the dates):
____ in formation; I received the scapular on date: _____
____ in temporary promise; I made my temporary promise on date: _____
____ in definitive promise; I made my definitive promise on date: _____
____ in vows; I made my vows on date: _____

(signature of applicant) _____
(application date)

1. Please verify the information given in Section 1 from Community records. If needed provide corrections.
2. Please provide a copy of the syllabus of your Community's formation program.
(If the applicant is in initial formation, please provide his/her attendance record.)
3. Please return this original application in a timely manner to the address given in Section 2.

The _____ Community Council has reviewed the above information, made appropriate corrections where necessary, and verifies this to be a true and correct record of the applicant _____ within this Community.

By: _____ date: _____
(signature of president, formation director or member of council)

----- **Section 2** -----

The _____ OCDS Community
(Receiving Community)
President/Council Member Representative: _____
Address: _____
City, state, zip: _____
E-mail: _____ Telephone: _____

----- **Section 3** -----
(to be completed only as applicable)

Upon completion of a period of discernment made by both the applicant and the receiving Community's council, The Council of the _____ Community is unable to receive _____ as a member of this Community.

Upon completion of a period of discernment made by both the applicant and the receiving Community's council, The Council of the _____ Community hereby receives _____ as a member of this Community.

By: _____ date: _____
(signature of president, formation director or member of council)

Released By: _____ date: _____
(signature of the releasing community president, formation director or member of council)

The releasing community must return the original application to the receiving community, in section 2, when section 3 has been completed to effect the transfer. The receiving community is responsible for distribution of copies to all affected parties and offices.