

Form 13, Report of Evaluation of Psychological Condition

To The Bishop of El Camino Real
Post Office Box 1903
Monterey, CA 93942

An evaluation of _____

When did the examination occur and how much time was involved:

1. Is there any serious maladjustment or limitation of the personality that, in your opinion, would disqualify this person for the ministry of the church?

Yes No

2. Are there any signs in the present behavior of this person that suggest that, in your opinion, this person may become ill under the usual pressures of clerical life?

Yes No

3. What is your impression of the ability of this person to respond adequately and appropriately to the emotional demands placed upon this person by the work of the ordained ministry?

Good Fair Doubtful Poor No comment

4. What is your impression of the likelihood of this person becoming unstable or dysfunctional because of nervous strain engendered by the role of the ordained minister?

Unlikely Likely Probably No comment

Signature of Examiner License State Date

Examiner Name (Print) : _____
Address _____

City, State ZIP Code _____
Office Telephone: _____