



**Anglican Diocese of Adelaide
Nomination of a Locum Tenens (2020)**

Sections 1, 3, 4 and 5 should be completed at least two (2) weeks prior to the commencement of the appointment. Please forward the completed form, and Section 3 documentation (if required), to:

- Bishops Office, Anglican Diocese of Adelaide, 18 King William Road, North Adelaide SA 5006; or
- bishopsoffice@adelaideanglicans.com

Section 1: Parish and Locum Tenens’ details

Parish and nominee details

Parish or Chaplaincy:				
Full name of Locum Tenens:				
Reason for vacancy:				
Period of Locum appointment:	From:		To:	

Nominating Wardens

We, Wardens of the Parish named above, hereby nominate the said Locum to the Archbishop of Adelaide for a Locum Tenens ministry and ask that a Licence be issued for the stipulated period.

Warden 1		Warden 2	
Full name:		Full name:	
Email address:		Email address:	
Contact phone:		Contact phone:	
Signature:		Signature:	
Date:		Date:	

Acceptance of appointment by nominated Locum Tenens

I, (*print full name*) accept the terms and conditions of appointment as Locum Tenens in the Parish nominated above, for the period specified, subject to the Archbishop’s will and pleasure and such other endorsements as may be included in the Licence. I confirm that all Diocesan Safer Ministry requirements are current.

Locum Tenens’ signature:		Date:	
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Recommendation of Archdeacon

Archdeacon’s signature:		Date:	
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Section 2: Diocese approval to appoint

Safer Ministry Screening

The nominated member of clergy has completed all aspects of the Safer Ministry Screening procedures and which have not identified any issue that would prohibit the provision of a Locum Tenens licence.

Registrar’s signature:		Date:	
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Archbishop’s Approval

Archbishop’s signature:		Date:	
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Section 3: To be completed by the nominated Locum Tenens ONLY if their last appointment was outside the Diocese of Adelaide

1. Were you ordained as part of an ordained local ministry scheme?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	If Yes, please attach details to this form.
2. Have you ever been subject to a formal disciplinary process by a church authority?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	If Yes, please attach details to this form.
3. Has a bishop ever revoked or refused to provide you with a licence or authority?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	If Yes, please attach details to this form.
4. Letter of Good Standing	Please attach your Letter of Good Standing to this form.

Section 4: Full-Time Equivalent Working Week

Please indicate how many days (1.0) or part-days (0.5) the Locum Tenens will be working in the Parish in addition to Sunday. Sunday is considered a full day (1.0) and includes time for sermon/other preparation. A full-time position is assumed to be six (6) days per week, eg. three (3) full days = 0.5 FTE. Please ensure the total allows for occasions where the Locum Tenens may be required to attend at non-regular times, eg. Parish Council or other meetings, special services, social gatherings, hospital/home visits.

Total Days		FTE (Diocesan Office to calculate)	
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Section 5: Remuneration Package

Please note that all items below are required payments to the Locum Tenens. Those items total \$250.30 per day.

Item	2020 per working day
Base stipend Refer to <i>C4 Parochial Administration Ordinance, section 63 Locum Tenens</i> ; and Annual Leave note (below).	\$213.80 <i>including superannuation</i>
Travel reimbursement Refer to <i>C4 Parochial Administration Ordinance, section 63 Locum Tenens</i> .	\$35.00
Telephone allowance A pro rata mobile phone plan reimbursement. Refer to <i>C4 Parochial Administration Ordinance, section 29</i> .	\$1.50
Total remuneration per working day	\$250.30

NOTES:

Annual Leave: Annual Leave is accrued on a pro rata basis but is not transferable to other locum appointments.

All locums will be paid by Diocesan Payroll Services and parishes will be billed accordingly.
Diocesan Payroll Services will provide a copy of the fully completed form to the parish Treasurer.

Treasurer's full name:	
Email address:	Contact phone: