PETITION FOR AN ECCLESIASTICAL DIVORCE

FOR PRIEST'S OFFICE USE ONLY

CONFIDENTIAL

Office of			
Office of [Name of Priest]			
Name of Petitioner			
Phone Number			
Name of Respondent	<u></u>		
Phone Number			
NECESSARY DOCUMENTS TO BE MAILED TO THE METROPOLIS OFFICE:			
1. Petition from Priest			
2. Petition from Party Filing for Divorce			
3. Original Ecclesiastic Wedding Certificate or Transcript			
4. Copy of Civil Divorce Decree			
5. Signed and Certified "No Objection" letter from spouse			
6. Money Order of \$250 issued to: "Metropolis of Boston"			

Metropolis of Boston

[PETITION FOR ECCLESIASTICAL DIVORCE BY PRIEST: PARISH LETTERHEAD]

I	Date
His Eminence Metropolitan Methodios Registry Greek Orthodox Metropolis of Boston 162 Goddard Avenue Brookline, MA 02445	
Your Eminence:	
I enclose a petition for an ecclesiastica	• •
Name of Petitioner/If female, Maiden Name	residing at[Street Address]
	an Orthodox Christian and his/her spouse
[City, State and Zip]	
r	residing at
[Name of Petitioner/If female Maiden Name]	[Street Address]
who have already been granted a civil divorce	e on the grounds of [Enter Grounds]
[Additional Com	ments]
[Explain reasons why the marriage should be disso	lved ecclesiastically. See Divorce Encyclical.]
[Mention if either or both have been	counseled by you.]
There exists no possibility of reconcili	[Name of Petitioner]
[Name of Petitioner. If Wife use Maiden Name]	[Priest's reason(s) for recommending the divorce be granted]
	has already remarried]
	nce look upon this matter with love and
	With respect,
	[signature of priest]
Metropolis of Boston	[s.S o. b.res.]

[name of priest typed] [PETITIONER'S LETTER FOR ECCLESIASTICAL DIVORCE]

(Type on plain white paper)

	Date	
His Eminence Metropolitan Method Registry Greek Orthodox Metropolis of Bos 162 Goddard Avenue Brookline, MA 02445		
Your Eminence:		
The undersignedborn inPlace of Birth]	[Name of Petitioner]and residing at[Add humbly requests that Your	lress, City, State and Zip]
dissolve the marriage between me a	and	•
dissorve the marriage between me t	[Name of S	pouse]
born in[Place of Birth]	and residing at[Address, Ci	ty , State and Zip]
at the Greek Orthodox Church of	[Name of Church] on	[Name of Priest] located at [Date]
We are unable to live togeth	ner, because	ds and Reason for Divorcel
	Superior Court of the State of	<u> </u>
dissolved our marriage civilly and v	was held in the city of	on [City]
	bearing the number	
[Date]	[Nun	nber and Docket if Applicable]
This was my[First/Second]	marriage and my spouse's	marriage. [First/Second]
	With respect, [Signature of Petitio [name of petitioner to	_

Metropolis of Boston