



# *The Most Worshipful Grand Lodge*

OF ANCIENT, FREE AND ACCEPTED MASONS OF  
THE COMMONWEALTH OF VIRGINIA

ALAN W. ADKINS, P.G.M.  
Grand Secretary  
4115 NINE MILE ROAD  
RICHMOND, VIRGINIA 23223-4926

Dear Interested Individual:

Shown on the next two pages is our “Petition for the Degrees,” which is to be completed in its entirety by a man interested in membership, who is at least eighteen (18) years of age, a resident of Virginia for the past twelve months, and who has had two Masons in good standing sign his petition. Along with the two-page petition is a “Disclosure and Authorization For Consumer Reports” form that gives the Grand Lodge of Virginia the right to perform a background check on you.

Upon their completion, the petition and authorization form will need to be submitted to a local Lodge, along with the Lodge’s required fees for a petition and background check. When printing out the petition, please print it on two sides, if at all possible. Please note that documents with sensitive personally identifiable information such as Social Security numbers and birth date must be stored securely, electronic versions shall be password protected, and must be encrypted when electronically (e-mailed) transmitted.

The usual process that follows is that your petition for degrees will be presented to the Lodge at its next meeting. The background check will be done and the final report is sent to you. A committee composed of three members of the Lodge will meet with you to answer any questions that you or your family may have concerning our Fraternity. The committee in turn will present their report to the Lodge, after which the Lodge will act upon your request.

If you have any further questions regarding this process, please contact the Grand Lodge office at 804-222-3110 or send an e-mail directly to me at [grandsecretary@grandlodgeofvirginia.org](mailto:grandsecretary@grandlodgeofvirginia.org).

Sincerely,

Alan W. Adkins  
Grand Secretary

**PETITION FOR THE DEGREES IN FREEMASONRY**

To the Worshipful Master, Wardens and members of

**Lodge No. \_\_\_\_\_ A.F. & A.M.**  
**\_\_\_\_\_, Va.**

Please print or type. Use reverse side, if needed, to fully answer questions.

1. (a) Name in full \_\_\_\_\_  
First Middle Last  
 (b) Preferred Name (not a nickname) \_\_\_\_\_

2. Residence \_\_\_\_\_  
Address City State Zip + 4

3. (a) Social Security No. \_\_\_\_\_ - - (b) E-mail \_\_\_\_\_  
 (c) Telephone No. (Home) \_\_\_\_\_ - - (Work) \_\_\_\_\_ - - (Cell) \_\_\_\_\_ - -

4. Have you ever petitioned this or any other Masonic Lodge? \_\_\_\_\_ If so, state name of Lodge, location, date and result of every petition:  
 \_\_\_\_\_  
(Use back of Petition for additional space.)

5. (a) Where born? \_\_\_\_\_ (b) Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
City/County State Month Day Year

6. (a) Name of Father \_\_\_\_\_ (b) Mother's Full Maiden Name \_\_\_\_\_

7. What is your occupation? \_\_\_\_\_

8. List names and addresses of your employers, beginning with your current employment, for the past ten years. (Use back of Petition for additional space.)

Name of Employer	Address	City, State, Zip	Your Occupation	Length of Employment

9. Where have you resided for the past ten years? (Use back of Petition for additional space.)

Address	Year From	Year To

10. (a) Single, Married, Widower, or Divorced? *(circle one)* (b) Wife's Maiden Name \_\_\_\_\_  
First Middle Last

List names, age and relationship of each of your dependents:

Name	Age	Relationship

11. Describe your physical defects and deformities, if any: \_\_\_\_\_

12. Have you ever been charged in a court of law with a criminal offense? YES NO *(circle one)* Explain circumstances on reverse.

13. (a) Have you answered all the questions above? \_\_\_\_\_ (b) Upon your honor, are the statements and answers true? \_\_\_\_\_

Having resided during the past twelve months within the jurisdiction of the Grand Lodge, A.F. & A.M., of Virginia, I hereby state that I believe and trust in God as the Supreme Architect and Governor of the Universe and that having been born as a male, as a child of God, and continued as a man, I am unbiased by friends and uninfluenced by mercenary motives. I hereby freely and voluntarily offer myself as a candidate for the degrees of Masonry, being prompted to solicit this privilege by a favorable opinion conceived of the Institution, a desire for knowledge and a sincere wish of being of service to my fellow creatures. Should this petition be granted, I will cheerfully conform to all the established usages and customs of the Fraternity and abide by its laws, rules and regulations. I have read and acknowledge the information for the applicant noted at the top of the reverse side of this petition. Also, I certify all information contained on this application to be accurate as of the date of my signature and acknowledge that any inaccuracies may void this application.

Date \_\_\_\_\_

The fee of \$ \_\_\_\_\_ accompanies this petition.

As the exact nature of the Institution of Freemasonry is unknown to you, it is deemed advisable that before signing the attached petition you should be informed on certain phases of that Institution which may affect your decision to apply for membership therein.

Freemasonry has in all ages required that men should come to its door entirely of their own free will; not as the result of importunity nor from feelings of curiosity; but from a favorable opinion of the Institution, a desire for knowledge, and a sincere wish to be serviceable to their fellow creatures.

Masonry is a system of morality based on the belief in the existence of God, the immortality of the soul, and the brotherhood of men; therefore no atheist can be made a Mason. It strives to teach a man the duty he owes to God, to his country, to his family, to his neighbor, and to himself. It inculcates the practice of every virtue and makes an extensive use of symbolism in its teachings. It interferes with neither religion nor politics, but strives only after light and truth, endeavoring always to bring out the highest and noblest qualities of men.

The Masonic Fraternity is in no sense an insurance society; neither does it pay benefits in case of sickness or death. In a correct and broad sense, it is both educational and charitable. It extends such assistance only as it is willing and able to grant. It knowingly admits none to membership except those who are able to provide for themselves and those dependent upon them.

**FOR LODGE USE ONLY**

PETITION FOR DEGREES of \_\_\_\_\_  
Name in full

Dates of Lodge actions: \_\_\_\_\_ Received at stated meeting of Lodge held on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Rejected \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Elected \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Initiated \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Passed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Raised \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Fees:  
E.A. \_\_\_\_\_ F.C. \_\_\_\_\_ M.M. \_\_\_\_\_ Annual Dues: \_\_\_\_\_ Member No. \_\_\_\_\_ - \_\_\_\_\_

NOTE—This petition must be filed and preserved in the archives of the Lodge for reference.

(Show Question Number)

**Additional Space For Information**

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**RECOMMENDERS (VOUCHERS) PLEASE FILL IN BELOW**

We hereby certify that the petitioner has resided for the one year last past or has Masonic residence in the Jurisdiction of the Grand Lodge of Virginia, that we are well acquainted with the petitioner, that we have read the answers to the questions contained in the petition and believe them to be true and that each of us believes the petitioner to be morally and physically qualified, of good character, and under the tongue of good repute. We cheerfully recommend him as a proper candidate for the degrees of Masonry.

NAME (please print) \_\_\_\_\_ (signature) \_\_\_\_\_

Present address \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP

Telephone No. (Home) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Work) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

NAME OF LODGE \_\_\_\_\_ NUMBER \_\_\_\_\_ LOCATION \_\_\_\_\_

NAME (please print) \_\_\_\_\_ (signature) \_\_\_\_\_

Present address \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP

Telephone No. (Home) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Work) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

NAME OF LODGE \_\_\_\_\_ NUMBER \_\_\_\_\_ LOCATION \_\_\_\_\_

**DISCLOSURE AND AUTHORIZATION  
FOR CONSUMER REPORTS**

In connection with my petition with the Grand Lodge of Virginia and \_\_\_\_\_ Lodge No. \_\_\_\_\_ (collectively referred to herein as “The Lodge”), I understand a consumer report will be requested by The Lodge. I understand that such reports may contain public record information such as: criminal records from federal, state, and other local agencies that maintain such records.

**Authorization**

**I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by the Lodge. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information.**

**This authorization is conditioned upon the following representations of my rights:**

I understand that I have the right to make a request to the consumer reporting agency: OneSource (“Agency”), 12 N. Braddock St., Winchester, VA 22601, 888-285-3545, upon proper identification, to obtain copies of any reports furnished to The Lodge by the Agency and to request the nature and substance of **all information** in its files on me at the time of my request, including the sources of information, and the Agency, on The Lodge’s behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by any investigative consumer report(s). The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request. I hereby consent to The Lodge obtaining the above information from the Agency. I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency’s privacy policy at their website: [www.OneSourceScreening.com](http://www.OneSourceScreening.com).

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**For identification purposes:**

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_

**NOTE:** Documents with sensitive personally identifiable information such as Social Security numbers and birth date must be stored securely, electronic versions shall be password protected, and must be encrypted when electronically (e-mailed) transmitted.