

This Item	Replaces
File: 5.5.4	
Date: Dec. 2013	May 2009
<i>Revised June 11, 2015</i>	

APPLICATION FOR LAY MINISTRY LICENSE

For the years _____ to _____
(max. 3 year period, followed by a review)

To: The Administrator, Diocese of Kootenay
#201 - 380 Leathead Road
Kelowna, BC V1X 2H8
ph. 778-478-8310 fax 778-478-8314
admin@kootenay.info

I, _____, hereby apply for a Lay Ministry License on behalf of:
Name of Priest

Name: _____

Address: _____
House # Street Name City/Town Postal Code

Phone Number: _____ E-mail address: _____

I request that he/she be licensed to perform the following ministry(ies) following completion of the LLM Program administered by the Kootenay School of Ministry.
(please check all that apply)

- | | <u>Date module completed</u> |
|--------------------------------------------------------------------------------------------------------------|------------------------------|
| _____ (a) Leading public worship in Morning and Evening Prayer | _____ |
| _____ (b) Leading services with Reserved Sacrament in hospitals, nursing and care homes, and home communions | _____ |
| _____ (c) Preaching (indicate date of KSM Preaching course) | _____ |
| _____ (d) Laying On of Hands and anointing sick or distressed persons | _____ |

I certify that this person:

Has been a member of this parish for _____ years; has been an Anglican for _____ years; and that this application is made with the approval of the congregational meeting of _____
Church Name, Town
_____ held on _____.
Date

I further certify this person:

Is involved in the following parish activities:

Ongoing training planned (please be specific):

Signature of Incumbent or Priest-in-Charge

Date

I, _____, agree to strengthen through study and practice
Name of Candidate
my understanding and competency in the areas noted above.

Signature of Candidate

Date