

APPLICATION FOR LICENSED EUCHARISTIC MINISTER

THE MISSIONARY DIOCESE OF CANA EAST
6731 CURRAN STREET, MCLEAN, VA 22101

Name of Applicant: _____

Date of Birth: _____

Parish/Mission: _____

Baptism Date: _____

Confirmation Date: _____

Training Received From: _____

Date Training Completed: _____

Signature of Applicant: _____

Endorsement of Rector/Vicar:

As Priest in charge of this congregation, I have examined the above named applicant and have found him/her to be proficient in the duties of a Eucharistic Minister. I thereby recommend him/her to minister to this congregation in that capacity.

Signature: _____

Date: _____

Endorsement of Vestry:

As Senior Warden of (church and city): _____

I hereby certify that (name) _____ has the approval and endorsement of the vestry to be a Eucharistic Minister in this congregation.

Date: _____ Signature: _____

Send to the CANA East Office for Bishop's Approval.
6731 Curran Street
McLean, VA 22101