

APPLICATION
Licensed Ministry in the Diocese of Newark
Eucharistic Minister/Eucharistic Visitor/Worship Leader

To the Bishop of Newark: In compliance with Title III, Canon 4, Sections 1 - 8, Of Licensed Ministries, I hereby submit my application, duly approved by my clergy-in-charge or warden to be licensed as a:
(check the category/categories that apply)

Eucharistic Minister _____ *Eucharistic Visitor _____ Worship Leader _____

*** Eucharistic Visitor applicant must have completed Prevention of Sexual Harassment and Exploitation training within the last five (5) years.**

*** Please include a certificate of completion for this training or contact Randy Johnson to arrange online training**

PLEASE COMPLETE THE FOLLOWING INFORMATION: (print or type)

1. Full name (including title): _____

Complete Address: _____

Date of Birth: _____ Gender: _____

Phone (Home): _____ (Cell): _____ E-mail: _____

2. I have been a member of this congregation since: _____

I was baptized in: Church: _____ City/State: _____

3. I was confirmed on (date): _____, in (Church name and denomination): _____

by The Right Rev. _____, Diocese of _____

4. I have received, or will complete, training in this work (be specific when applying for multiple licenses). Check the appropriate box:

Church name and city _____ - or - Diocesan training session

Name of Trainer(s): _____ Date(s) of Training: _____

Date of Application: _____ Signature of Applicant: _____

5. Endorsement by clergy-in-charge or warden:

I testify to my belief (based on personal knowledge or evidence satisfactory to me) that this applicant for Licensed Ministry qualifies for the office(s) under the requirements of Title III, Canon 4 and I hereby request such licensing and recommend the candidate to the Bishop for favorable action.

Date: _____

Name: _____

Signature: _____

Congregation: _____

City: _____

(Term of licenses is for a three-year period, unless otherwise stated.)