

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/ they 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>
	Introductory Module: <i>Understanding Lay Ministry</i>	_____
_____ (a)	Leading public worship in Morning and Evening Prayer (Required Module: <i>The Basics of Liturgy</i>)	_____
_____ (b)	Leading services with Reserved Sacrament in hospitals, nursing and care homes, and home communions (Required Module: <i>The Eucharist and the Life of the World</i>)	_____
_____ (c)	Preaching (indicate date of KSM Preaching course) (Required: KSM Course: O104-001 <i>Preaching</i>)	_____
_____ (d)	Laying On of Hands and anointing sick or distressed persons (Required Module: <i>Laying-on of Hands and Anointing</i>)	_____

I certify that this person:

Has been a member of this parish for _____ years and has been an Anglican for _____ years.

I further certify this person is involved in the following parish activities:

Ongoing training planned (please be specific):

I confirm that parish council is aware of this application submission.

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