DIOCESE OF NOVA SCOTIA & PRINCE EDWARD ISLAND
DIOCESAN LAY READERS ASSOCIATION

APPLICATION FOR LICENSING AS LAY READER-IN-TRAINING

[please type or print clearly]

Name: _____ _____ _____
Last First Middle

Address: _____ _____
Street/Box No. Apt.

_____ _____ _____
City Prov. Postal Code

Date of Birth: _____ Baptized - When: _____
d/m/y

Where: _____

Marital Status: _____

Name of Spouse (if married): _____

Parish: _____

Region: _____

Place of Lay Reader-in-Training Course: _____

Date of Lay Reader-in-Training Course: _____

TO BE FILLED IN BY THE RECTOR OF THE PARISH

This is to certify that the above-named applicant has completed a Lay Reader-in-Training program, and at the regular meeting of Parish Council on _____, this person's name was presented to Council, who approved of the preparation of this application which will allow the above-named to grow and mature in this ministry among us.

Date: _____ Signed: _____

TO BE FILLED IN BY THE PRESIDENT AND THE WARDEN
OF THE LAY READERS ASSOCIATION

We approved this application and commend it to the Bishop for his information and to the Tutor for the Parish for on-going education.

_____ _____
President of Association Warden of Association