



The Licensed Lay Ministers' Association
of the Diocese of Nova Scotia & Prince Edward Island
Application for Commissioning as a Lay Minister-in-Training

(Please Print Clearly in Black)

Last _____ First _____ Middle _____

Mailing Address: (# & Street /Box No./) _____ Apt. _____ City

_____ Province _____ Postal Code _____

Telephone: (Home) _____ - _____ - _____ Cell Number: _____ - _____ - _____ E-

mail Address: _____

Rector: _____

Parish: _____ Region _____

Location of Lay Minister-in-Training Course _____ Date of Lay Minister-in-Training Course _____

Signature of Applicant: _____ Date: _____

TO BE FILLED IN BY THE RECTOR OF THE PARISH

This is to certify that the above named applicant has completed the Lay Minister-in-Training program. At our regular meeting of Parish Council on _____, this person's name was presented to Council, and approved. This will allow the above named to grow and mature in this ministry.

Rector's Name: _____

Rector's Signature: _____ Date: _____

Please mail this form to: The Rev'd Darlene Jewers, Warden of the Licensed Lay Ministers' Association

14 Gillis Crescent, Port Hawkesbury, NS B9A 3M8

I approved this application

Name — Warden, Licensed Lay Ministers' Association: _____

Signature: _____ Date: _____

approved May 2019