

TESTIMONIAL OF SUITABILITY FOR MINISTRY – DIOCESAN CLERGY

To: (Bishop of the receiving Diocese)

From: (sponsoring Bishop)

Address:

.....

.....

Tel:

Concerning:

DOB:

.....

(full name and date of birth of visiting priest or deacon)

This cleric is a: PRIEST / DEACON (please circle whichever is appropriate)

The Rev of the Diocese of..... is seeking to exercise ministry in your jurisdiction. Having carefully reviewed our personnel files and all other records that I hold, and based on these and on my own personal knowledge, I am able to make each of the following statements which I have initialled (NB: if you are unable to make one or more of the following statements, but would still claim that the priest or deacon is in good standing and that you would recommend him for ministry, please explain clearly the details and your reasons on the reverse side of this document):

_____ He is a priest or deacon under my jurisdiction and is in good standing

_____ He has never been suspended or otherwise canonically disciplined

_____ No criminal charges have ever been brought against him, and he has no criminal record.

_____ He has never behaved in such a way as to indicate that he is likely to deal with children or vulnerable adults in an inappropriate manner nor have any allegations ever been made against him with respect to such inappropriate behaviour.

_____ He has never behaved in such a way as to indicate he might engage in sexual behaviour inconsistent with priestly celibacy.

_____ He does not have an unresolved problem with alcoholism or other forms of substance abuse.

_____ He enjoys good physical and mental health and is not in need of medical treatment.

_____ He is sufficiently fluent in the English language to enable him to undertake public active ministry.

I hereby grant him permission to seek to exercise the ordained ministry in your jurisdiction in England and Wales for a period of from with the understanding that such a ministry is of a temporary nature.

This document issued on: and is valid until:

.....

(maximum 12 months from

date of issue)

Signature: Date:

N.B: This document is valid for a maximum of 12 months from date of issue.

Please affix official seal of Diocese