

TESTIMONIAL OF SUITABILITY FOR MINISTRY – NON- ORDAINED RELIGIOUS

To: (Congregational Leader of receiving Province)

From: (Congregational Leader)

Address:

.....

.....

Tel:

.....

Concerning:

DOB:

.....

(full name and date of birth of visiting Religious)

This Religious is a: Brother/ Sister (please circle whichever is appropriate)

Br/ Sr who is a member of the.....
Province of.....(name of Institute) 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 religious Brother or Sister is in good standing and that you
would recommend him or her for ministry, please explain clearly the details and your
reasons on the reverse side of this document):**

_____ He/she is a brother or sister under my jurisdiction and is in good standing

_____ He/she has never been suspended or otherwise canonically disciplined

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

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

_____ He/she has never behaved in such a way as to indicate he/she might engage in sexual behaviour inconsistent with religious chastity.

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

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

_____ He/she is sufficiently fluent in the English language to enable him/her to work in public active ministry*/ministry associated with the Institute*. (delete as appropriate)

I hereby grant him/her permission to seek to exercise a non-ordained ministry within your jurisdiction in England and Wales, 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 Province/Region/Abbey