

DIOCESE OF CHARLESTON

APPLICATION for LITURGICAL MINISTERS

OFFICE USE ONLY

Date Received: ____/____/____

Date Mailed: ____/____/____

Date(s) of Training: _____

Copy to Safe Env.: YES / NO

Parish: St. John Neumann Catholic Church in Columbia, SC Pastor: Rev. C. Alexander McDonald

Please print clearly:

Name: _____ Telephone: _____

Address: _____ City/Zip Code: _____

Email Address: _____

Occupation: _____ Employer: _____

Date of Birth: ____/____/____ Place: _____ Age: ____

Circle all sacraments received: • Baptism • First Communion • Confirmation

Marital Status: Single () Married () Separated () Divorced () Widowed ()

If married, is your marriage recognized by the Catholic Church? Yes ___ No ___ (i.e., Married in a Catholic wedding, or had permission to be married elsewhere, or the marriage was later "blessed" by a convalidation in the Catholic Church)

Ministry to serve (circle all as they apply):

✠ Extraordinary Minister of Communion at Mass ✠ Lector

A separate application with background check will be sent to you for the following ministries:

✠ Minister of Communion to the Sick ✠ Usher ✠ Sacristan

Mass Time Preference: 1st Choice: _____ 2nd Choice: _____ Holy Days: Yes / No

Brief description of your faith journey and educational background:

Describe ways you are involved in the Parish:

Reason for wanting to serve:

Approved by Pastor: _____ on _____ (Signature) (Date)