

# Application Form for ECMN Licensed Lay Ministries

After training has been accomplished, send completed forms to: **Licensed Lay Ministries, ECMN 1101 West Broadway, Minneapolis, MN 55411**. A License is conferred for a period of 5 years, after which it may be renewed.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Faith Community/City: \_\_\_\_\_

Date of Application: \_\_\_\_\_

## **Applicant Certification:**

I hereby affirm that I am prepared to carry out ministry as a Licensed Lay \_\_\_\_\_ and will perform this ministry faithfully and to the best of my ability.

\_\_\_\_\_  
Applicant Signature

## **Faith Community Certification:**

I hereby certify that the above named is a duly baptized and confirmed communicant in good standing at above named Faith Community in above name city and has satisfactorily completed training for ministry as a Licensed Lay Minister (check below) as outlined by the Commission on Ministry of the Episcopal Church in Minnesota.

Pastoral Leader  Worship Leader  Preacher  Eucharistic Minister

Eucharistic Visitor  Catechist  Evangelist

\_\_\_\_\_  
Trainer (if other than rector/vicar/priest in charge)

\_\_\_\_\_  
Rector/Vicar/Priest in Charge/Ministry Developer

## **For ECMN Use:**

Date License Granted \_\_\_\_\_ Date License Expires \_\_\_\_\_