



Reader & Extraordinary Minister of Holy Communion Testimonial of Suitability

Please answer questions and fill in all appropriate blanks. This form is not an application for employment. The information is for the Safe Environment program of the Archdiocese of New Orleans. This form will not be used to determine employment status.

Name: _____
 First Middle Last Suffix

Street Address: _____
 Address City State Zip

Church Parish: _____ Civil Parish: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

How long have you been a parishioner at your parish? _____

____ Yes ____ No Are you an active Catholic in good standing with the Church?

____ Yes ____ No Have you ever been accused of physically, sexually, or emotionally abusing a child or an adult?

If yes, please explain: _____

____ I promise that I have been truthful in the responses I have given above.

____ I agree to observe all of the Archdiocese of New Orleans guidelines for the Office of Worship and Safe Environment.

Applicant Signature: _____ Date: _____

Parishes are to keep original on site.