THE EPISCOPAL DIOCESE OF WEST VIRGINIA

Application for License
Eucharistic Visitor

Name:

Address: _____

Email: _____ **Phone:** _____

Date of Birth: _____ **Parish:** _____

For License Renewals

- O I have been previously licensed in the Diocese of West Virginia for this ministry and have completed all the required Safe Church and Anti-Racism and Dismantling Racism training.

For New Licenses

- O I certify that I have completed all the required Safe Church and Anti-Racism and Dismantling Racism training for Lay Licensing for this ministry by the Diocese of West Virginia and such records can be found on file with the Diocese.
- O I certify that I have completed all required training for Lay Licensing for this ministry by the Diocese of West Virginia and evidence for such is included with this application.

Applicant Signature: _____

Name of Rector or Clergy in Oversight: _____

I certify the following is true of the above name applicant:

- O They are a baptized and confirmed member of the parish listed above.
- O They have been educated in the basic theology of the Holy Eucharist and in all practical aspects of the consecration and distribution of the Holy Sacrament as required for Lay Licensing by the Diocese of West Virginia.
- O To the best of my knowledge, they live a godly life and their work in this lay ministry will not bring disrepute to the parish or the Church.
- O My signature constitutes my endorsement and serves as my letter of support.

Clergy Signature: _____ **Date:** _____

Please return to:
Attn: Michael Scaglione
PO Box 5400
Charleston, WV 25361
304.344.3597 + WVDiocese.org