



ARCHDIOCESE OF HARTFORD
 OFFICE OF RELIGIOUS EDUCATION
 467 BLOOMFIELD AVENUE
 BLOOMFIELD, CONNECTICUT 06002

**APPLICATION FOR LAY MINISTRY PROGRAM
 2010-2012**

PASTOR'S RECOMMENDATION FOR LAY MINISTRY

Name of Applicant: _____

How long have you know this applicant? _____

Please answer the following questions as completely and honestly as possible and return this form to:

Mary E. Marsan, M. Div.
 Office of Religious Education
 467 Bloomfield Avenue
 Bloomfield, CT 06002-2999

1. Why are you sending this person to the Lay Ministry Program?

2. What will be this person's area of ministry in the parish? Be as specific as possible.

3. What are your expectations of this person in the parish, after he or she completes this program?

 Signature

 Date