## S4.22 Approval for Ministry

Dear\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert name of applicant),

I wish to confirm that you are authorised to minister in the Diocese of Meath as follows:

In \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert location)

Duration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert start and end date)

Type of ministry \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert specified ministry)

I will retain a copy of this letter, and a copy has been forwarded to your own local superior/parish priest and to the parish priest of the location in which you will be ministering.

With every blessing,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Insert signature of Bishop)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Insert date of Bishop`s signature)

**Data Protection**

*This form will be held on file in accordance with the data protection policy of the Diocese of Meath. The data entered will be used only for the purposes indicated on the form. It may be accessed only by those with responsibility for managing files*