



Anglican Diocese of Ottawa

LICENSED LAY READER
Application Form

Form with checkboxes for New Application, Transfer, and Renewal.

Please return the completed application form to The Reverend David Andrew
Warden of Lay Readers
St James Church,
225 Edmund Street,
Carleton Place, ON K7C 3E7

Name: \_\_\_\_\_
First Initial Last

Address: \_\_\_\_\_
Number Street Apt No., Unit No., P.O Box

City/Town \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone, Fax, Email:

Home #: \_\_\_\_\_ (H) Fax: \_\_\_\_\_ (H) Email: \_\_\_\_\_

Work / Alt #: \_\_\_\_\_ (W) Fax: \_\_\_\_\_ (W) Email: \_\_\_\_\_

Best time to call? Morning/Afternoon/Evening Cell #: \_\_\_\_\_

Use extra paper if additional space needed to answer the following questions

Milestones on your Christian journey (please check any and all boxes which apply):

- Checkboxes for Baptism, Confirmation, Received into the Anglican Communion, and Reaffirmation of Baptismal Vows, each with fields for Year, Place, and Church.

Describe your Christian faith and experience.

Multiple horizontal lines for writing a description of faith and experience.



## Anglican Diocese of Ottawa

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**In what areas do you wish to serve? (Please check any and all boxes which apply):**

- Worship Assistant                       Preaching             Leading Services  
 Christian Education (catechesis)        Pastoral Care  
 Other \_\_\_\_\_

**Why do you want to serve in these ministries? How do you hope to benefit?**

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**What experience, skills and qualifications do you bring to these ministries?**

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## Anglican Diocese of Ottawa

### Licensed Lay Reader Screening Form

Please read carefully. A check in each box indicates agreement.

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	I understand that ministry is a privilege, not a right, and that my desire to serve must, at all times, be affirmed by the church through its screening process.
	I understand that an appointment as a Licensed Lay Reader requires that I provide three references and acquire a Police Background Records Check as part of the screening process.
	I understand that in accepting a ministry position, I am committing myself to act in compliance with the beliefs, values, policies and processes of the Anglican Diocese of Ottawa.
	I have received a copy of the licensed Lay Reader position description and understand the responsibilities associated with it. I am aware of the policies that affect this ministry.
	I understand that training and accountability are key support for my position. Therefore, I will attend training, as required by the position, and meet regularly with the leader responsible for the ministry to which I am being appointed.
	I know that the parish or Diocese will maintain a file on persons filling medium and high-risk positions in compliance with the Diocese of Ottawa <i>Screening in Faith Policy</i> . This information is private and will be kept in a secure location. Upon request, I shall be given access to that information and be able to challenge the accuracy and completeness of the information and have it amended as appropriate.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

**This Application Form must be submitted by the Incumbent along with the Endorsement Form (LRE2011) and the original PRC (this will be returned).**

*Please place this completed document in the applicant's file in a locked filing cabinet. Record the completion of this step on the applicant's Screening Checklist Form*

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**Anglican Diocese of Ottawa**

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**Licensed Lay Reader Reference Check Permission Form**

I, \_\_\_\_\_, give the Anglican Diocese of Ottawa permission to contact the references listed below and representatives of the churches and ecclesiastical jurisdictions listed in my application form to discuss my suitability as a *Licensed Lay Reader*.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

List three persons who have knowledge of your qualifications. Your references should be people you know through different relationships and/or situations. For example: a family member, a friend and an employer (paid or volunteer position). Ideally the three references that you provide should come from each of these categories. Please ensure that one of the two non-family references has known you for at least 5 years.

If you have moved from another parish within the last 12 months, please provide one reference from your previous parish. If you have moved from another diocese or jurisdiction please provide a reference from your worshipping community and, if applicable, from your supervisor or person(s) who oversee this type of ministry in that place.

Use the back of this form if additional space is required.

**Reference One**

**Name:** \_\_\_\_\_  
*First* \_\_\_\_\_ *Last* \_\_\_\_\_

**Address:** \_\_\_\_\_  
*Number* \_\_\_\_\_ *Street* \_\_\_\_\_ *Apt No., Unit No., P.O Box* \_\_\_\_\_

*City/Town* \_\_\_\_\_ *Prov.* \_\_\_\_\_ *Postal Code:* \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Best time to call? Day or Evening .

**Relationship to the candidate:** \_\_\_\_\_ **Length of relationship:** \_\_\_\_\_

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**Reference Two**

**Name:** \_\_\_\_\_  
*First* \_\_\_\_\_ *Last* \_\_\_\_\_

**Address:** \_\_\_\_\_  
*Number* \_\_\_\_\_ *Street* \_\_\_\_\_ *Apt No., Unit No., P.O Box* \_\_\_\_\_

*City/Town* \_\_\_\_\_ *Prov.* \_\_\_\_\_ *Postal Code:* \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Best time to call? Day or Evening.

**Relationship to the candidate:** \_\_\_\_\_ **Length of relationship:** \_\_\_\_\_

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**Reference Three**

**Name:** \_\_\_\_\_  
*First* \_\_\_\_\_ *Last* \_\_\_\_\_

**Address:** \_\_\_\_\_  
*Number* \_\_\_\_\_ *Street* \_\_\_\_\_ *Apt No., Unit No., P.O Box* \_\_\_\_\_

*City/Town* \_\_\_\_\_ *Prov.* \_\_\_\_\_ *Postal Code:* \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Best time to call? Day or Evening

**Relationship to the candidate:** \_\_\_\_\_ **Length of relationship:** \_\_\_\_\_

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