

Request for Statement of Suitability

To be mailed or faxed to:

*Office of the Chancellor
Diocese of Covington
1125 Madison Ave.
Covington, Kentucky
41011-3115*

(859)392-1508

Requesting Priest/Deacon: _____

Diocese where you are asking to minister: _____

Parish/Institution where you are asking to minister: _____

Pastor/Administrator/Superior of Parish/Institution: _____

Address of Parish/Institution: _____

Exact dates: _____

Reason (wedding, funeral, speaking engagement, etc.): _____

If for a wedding or funeral, please indicate the first and last names of the couple or the deceased:

Priest's/Deacon's signature: _____ Date: _____