Diocese of Covington Application form for Verification of Good Standing - PRIESTS and DEACONS

Full Name of Priest/Deacon:
Current Address:
Name/Address/Phone of Diocese where priest/deacon is currently serving:
Name/Address/Phone of Diocese where priest/deacon is incardinated:
Name/Address/Phone of religious superior if applicable:
Service requested in the Diocese of Covington
Purpose of Service:
If speaker, give content of talk; if wedding, please give full names of the bride and groom; if funeral, give full name of the deceased:
Date(s) of Service:
Place of Service:
Mail to Mrs. Jamie SchroederDiocese of Covington, 1125 Madison Ave., Covington, KY 41011
Or FAX to 859-392-1508
Submitted by:
Phone Number: Email:
Note: Do not give this form to the priest/deacon being screened. Please wait for clearance before advertising.