

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

Full Name of Priest/Deacon:

Current Address:

Name/Address/Phone/Email of Diocese where priest/deacon is currently serving:

Name/Address/Phone/Email of Diocese where priest/deacon is incardinated:

Name/Address/Phone/Email 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:

**Please check the appropriate option below:**

The Priest/Deacon named above has requested/will request that his Chancery or Religious Institution send a Statement of Suitability to the Chancery of the Diocese of Covington.

OR

The Priest/Deacon named above has not requested that a Statement of Suitability be sent from His Chancery or Religious Institution. Please initiate the screening process.

**Submit by mail, fax, or email to:**

**Chancellor...**Diocese of Covington, 1125 Madison Ave., Covington, KY 41011  
FAX: 859-392-1508                      Email: [chancery@covdio.org](mailto:chancery@covdio.org)

Submitted by:

Phone Number:

Email:

Signature of Proper Authority or his/her Delegate (of the requesting parish/institution/organization):

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*Note: Do not give this form to the priest/deacon being screened. Please wait for clearance before confirming his service or advertising the event.*

*Revised 10 July 2019*