



PETITION FOR EXTRAORDINARY MINISTER OF HOLY COMMUNION DIOCESE OF ORLANDO

*The box below must be completely filled in electronically. The bishop's signature will not be affixed to handwritten documents.
If you need assistance filling in this form electronically, please contact your parish office or ministry coordinator.*

Name: _____	Date of Birth: _____ <small>(MM/DD/YYYY)</small>	
Home Address: _____		
Phone Number: _____	Email Address: _____	
Parish of Registration: _____	City: _____	
Scheduled Diocesan Formation Session: _____ <small>(Date - Parish - City)</small>		
Extraordinary Ministers of Holy Communion to the Sick and Homebound ONLY		
Will you be serving as an EMHC to the Sick and Homebound?	YES	NO
If yes, have you been fingerprinted for the Diocese of Orlando?	YES	NO
Date fingerprinted: _____ <small>(MM/DD/YYYY)</small>		

ATTESTATION OF THE PASTOR

I attest:

1. That this candidate is known to me;
2. That this candidate has been interviewed and found to be an exemplary member of this Catholic community, to have a good understanding of the vocation to be a baptized, confirmed Christian, to have a proper understanding of the theology of the Eucharist, and to be aware of the obligation to try to lead a holy life;
3. That this candidate is free of impediments and has freely consented to assume the role of Extraordinary Minister of Holy Communion;
4. That this candidate has successfully completed the Diocesan Safe Environment Training;
5. That if this candidate is to serve as an EMHC to the Sick and Homebound, he/she has successfully passed the diocesan fingerprinting process prior to beginning ministry;
6. That I am willing to assume responsibility for the continual spiritual development of this candidate as it relates to his/her service as an Extraordinary Minister of Holy Communion.

Pastor's Signature

Date

This petition must be mailed together with the \$10 processing fee if paying by check to the Office of Liturgy prior to the desired training session. EMHC candidates must also be registered online no later than 12:00pm the Wednesday prior to the desired training session. The processing fee can also be paid by credit card through the online registration portal. Mail petitions to: Office of Liturgy, P.O. Box 1800, Orlando, FL 32802.

GRANTING OF MANDATE BY THE BISHOP (after the successful completion of diocesan sponsored formation)

I grant the above named candidate the privilege of distributing Holy Communion during the Celebration of Mass and/or distributing Holy Communion as a Minister to the Sick and Homebound in the above named parish of registration. This mandate is granted for five years from the calendar year of signature.

Bishop of Orlando

Date

Office of Liturgy use only.

Received:

Class completed: