



NORTH AMERICAN COLLEGE

INSTITUTE FOR CONTINUING THEOLOGICAL EDUCATION

00120 VATICAN CITY STATE

E U R O P E

CONFIDENTIAL LETTER OF RECOMMENDATION FROM APPLICANT'S DIOCESAN BISHOP OR MAJOR SUPERIOR WRITTEN ON BEHALF OF:

(APPLICANT'S NAME).....

In order to be of most effective service to you and to the priest-applicant from your Diocese / Religious Province, the Admissions Committee of the Institute for Continuing Theological Education would be grateful to you if you would respond to the following questions about the candidate under consideration as completely as you are able.

1. Does the applicant seem satisfied and happy in his priestly ministry? Please describe and comment.
2. Does the applicant enjoy adequate social adjustment? Is he happy with and in the presence of others? Please comment, especially on his acceptance of and by his peers.
3. Does the applicant have any personal problems of which the Director of the ICTE should be aware? Please comment.
4. Does the applicant really desire theological study as well as time and travel abroad?

5. Do you see the applicant, and the local Church, and the other participants of the Institute benefiting by his acceptance? Please comment.

***Certification of Criminal Background Check and
Freedom from Allegations of Sexual Misconduct with Minors***

This is to certify that the person named above is a priest in good standing of this (arch) diocese or religious community and is, to the best of my knowledge, free of any and all allegations of sexual misconduct with minors.

Please check one of the following:

- Freedom from any and all such allegations has been verified by a criminal background check and/or a child abuse history clearance.
- Criminal background check and/or child abuse history clearance is not available in this jurisdiction; freedom from any and all such allegations of sexual misconduct with minors has been alternatively established by other means of investigation (*documentation attached*).

6. Therefore, I wish to make application for this priest of my Archdiocese / Diocese or Religious Community to participate in the Institute for Continuing Theological Education.

Your name:

Your Signature:

Today's date:

Please note: The candidate's application dossier will be considered only if this letter or recommendation bears the signature of his Diocesan Bishop or Major Superior.

Please e-mail romeshabat@pnac.org or FAX this form (39 06) 687-1529 and then airmail it to:

**The Director
Institute for Continuing Theological Education
NORTH AMERICAN COLLEGE
00120 VATICAN CITY STATE
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