

**(This sheet is to be completed by the Community Director.)**

Community # \_\_\_\_\_ Community Name \_\_\_\_\_

City/State (Canadian Province) \_\_\_\_\_

We respectfully request that the following person be appointed for our Spiritual Assistant:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP  
(CANADIAN PROVINCE) \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

1. Is this person a member of the Carmelite Order? \_\_\_\_\_
2. List briefly the services which this person, if appointed as Spiritual Assistant, agrees to perform for your Lay Carmelite community in the course of the year:

---

---

---

3. Is this person familiar with articles #3 and #4 of Statutes, Chapter 5 (pages 74-75)? \_\_\_\_\_
4. Is this person familiar with article #3 of Statutes, Chapter 6 (page 77)? \_\_\_\_\_
5. Is the community council in agreement with the request for this person to serve as the Spiritual Assistant for their community? \_\_\_\_\_
6. Are the members of the community generally positive regarding the request for this person to serve as Spiritual Assistant for their community? \_\_\_\_\_

[illegible]

7. List any other information, if applicable, which would be helpful to the Provincial Delegate in making this appointment for your local Community:

---

---

---

Director's signature: \_\_\_\_\_ Phone: \_\_\_\_\_

e-mail \_\_\_\_\_

Please return this form to: Lay Carmelite Office  
8501 Bailey Road  
Darien IL 60561