***Please fill out this page ONLY if your church is a…***

**Campus Ministry**

**Certification of Lay Delegates**

From the **Campus Ministry** of

Church Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WE HEREBY CERTIFY THAT the following people have been duly elected or appointed to act as Lay Delegates in the forthcoming Convention.

Street address

Last name First name Email address City/State/Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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WE FURTHER CERTIFY THAT the following people have been duly elected or appointed to act as Alternate Lay Delegates in the forthcoming Convention.

Street address

Last name First name Email address City/State/Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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We further certify that they are at least 18 years of age; registered full- or part-time students at the college or university with which the campus ministry is affiliated; are regular worshippers and communicants in good standing; and that they are not under ecclesiastical censure or process.

Witness our hands this\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 2020.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Rector or Warden

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Clerk of the Vestry

 Examined and found correct\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_

Assoc. for Operations, Dio. of Chicago

***Scan and email completed form to*** ***kgutierrez@episcopalchicago.org*** ***or***

***fax to 312-787-5872 by September 30, 2020.***