

APPOINTMENT OR RATIFICATION OF OFFICER

Please provide all of the following information and give this form (AND A COPY), when completed, to the Curia President. Completed forms not received in advance of the Curia meeting or on the morning prior to the meeting, during your interview, may be deferred to the following meeting. You are asked to arrive early to the Curia meetings – by 10:30 so you can be interviewed for the Office.

APPLYING TO THE OFFICE OF: _____
(President, Vice-President, Treasurer, or Secretary)

_____ 1st Term or for Re-appointment of _____ 2nd Term (check one)

NAME OF CURIA: Lincoln Curia – Lincoln, NE

NAME OF PRAESIDIUM: _____

NAME OF PARISH: _____

CITY AND STATE: _____

TO BE EFFECTIVE: _____
(Month and Year)

NEW OFFICER

NAME: Mrs.
Miss
Ms.
Mr. _____
(First Name, Initial, Last Name)

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____
(Area Code) (Number)

EMAIL ADDRESS: _____

TO REPLACE: _____
(Name of Previous Officer)

For Curia Use

MEETING WHEN APPOINTED OR RATIFIED: _____
One copy of this form is to be forwarded to the Senatus