

**DIocese OF FORT WAYNE-SOUTH BEND**

Office of the Vicar General

Archbishop Noll Catholic Center

915 South Clinton Street P.O. Box 390, Fort Wayne, IN 46801

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**AFFIDAVIT OF SUITABILITY**

**FOR MINISTRY IN THE DIocese OF FORT WAYNE-SOUTH BEND**

I, the undersigned \_\_\_\_\_,

Major Superior of \_\_\_\_\_  
(Religious Order)

hereby certify that \_\_\_\_\_ is a priest in good standing, of

\_\_\_\_\_  
(Religious Order)

\_\_\_\_\_  
(Address of Religious Order) (City/State/Zip)

who enjoys all the faculties for the exercise of his priestly ministry. After reviewing his personal file, checking with some who have worked with him in previous assignments, and/or from my own personal knowledge of the subject,

I am able to certify without qualification that \_\_\_\_\_ has:

1. Never been suspended or otherwise canonically disciplined; *(If so, please explain on the back of this form or in a separate letter.)*
2. Never had criminal charges brought against him; *(If so, please explain on the back of this form or in a separate letter.)*
3. Not manifested behavioral problems in the past that would indicate he might deal with minors in an inappropriate manner;
4. Never been involved in an incident which called into question his fitness or suitability to fulfill the responsibilities and duties of his priestly ministry due to alcohol, substance abuse, violations of celibacy, physical or sexual abuse, financial impropriety or other causes;
5. No other particular mental or physical attribute, condition and/or past situation, which would adversely affect his performance.
6. All safe environment training required \_\_\_\_\_ is current and up to date.  
(Religious Order)

I am able to state without qualification that Rev. \_\_\_\_\_ is of good character and reputation and qualified to perform his priestly duties in the Diocese of Fort Wayne-South Bend

(SEAL)

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Rev. \_\_\_\_\_ will be coming to the Diocese of Fort Wayne-South Bend for:

\_\_\_\_\_ at  
(Purpose)

\_\_\_\_\_  
(Parish or Institution)

\_\_\_\_\_ (City) \_\_\_\_\_ (Dates for this Application)