Testimony of Good Standing for Mission Presenters
Office of Propagation of the Faith, Diocese of Salina
PO Box 980, Salina, Kansas 67402-0980
(Form updated January 1, 2022)

A copy of this form is to be completed for each presenter from your mission group. This form must be received by the Diocese a minimum of 30 days before the presenter’s first presentation in the Diocese of Salina.

This is to certify that I have reviewed the personnel file of, checked with those who have worked with, and from my personal knowledge of ____________________________,
(name of priest, deacon, religious, or lay person doing the mission appeal)
of ____________________________, The afore-mentioned person currently resides in
(name of (Arch)Diocese or mission group).

the (Arch)Diocese of ____________________________, and the name of the (Arch)Diocese that they represent or that their mission group headquarters is located in is ____________________________.
(name of Archdiocese or Diocese)

I am able to make each of the statements listed below which I have checked off in the appropriate section:

(For a priest or a deacon)
___ He is ordained and in good standing of my diocese or community.
___ He has never been suspended or otherwise canonically disciplined.
___ No criminal charges have ever been brought against him, nor does he have a criminal record.
___ He has never behaved in such a way as to indicate that he might act in an inappropriate manner with a minor (an individual under eighteen years of age,)
___ He has never behaved in such a way as to indicate that he might be suffering from alcoholism or other forms of substance abuse.
___ He has no mental, moral, or emotional condition that might adversely affect his performance as an ordained minister of the Church.
___ He is a legal permanent resident or possesses an appropriate current visa.
___ He/She has completed Safe Environment Protocol training (including a criminal background check) through the Diocese of Salina.

(For a member of a religious institute)
___ He/She is a religious in good standing of my community.
___ He/She has never been suspended or otherwise canonically disciplined.
___ He/She has never had any criminal charges against him/her, nor does he/she have a criminal record.
___ He/She has never behaved in such a way as to indicate that he/she might deal with minors in an inappropriate manner.
___ He/She has not behaved in such a way as to indicate that he /she might be suffering from alcoholism or other forms of substance abuse.
___ He/She has no mental, moral, or emotional condition which might adversely affect his/her performance as a religious.
___ Is a legal permanent resident or possesses an appropriate current visa.
___ He/She has completed Safe Environment Protocol training (including a criminal background check) through the Diocese of Salina.
(For a lay person)
___ He/She is a Catholic in good standing with the Diocese of __________________
___ He /She has had no criminal charges brought against him/her nor does he/she have a criminal record.
___ Has never behaved in such a way as to indicate that he/she might deal with minors in an inappropriate manner.
___ He/She has not behaved in such a way as to indicate that he /she might be suffering from alcoholism or other forms of substance abuse.
___ He/She has no mental, moral, or emotional condition that might adversely affect his/her performance as a representative of your community.
___ Is a legal permanent resident, or possesses an appropriate current visa
___ He/She has completed Safe Environment Protocol training (including a criminal background check) through the Diocese of Salina.

The above-named person is of good moral character and reputation and is fully qualified to represent our mission enterprise.

______________________________________________________
Signature  Date 

_____________________________________________________________________________
Printed Name and Title

_____________________________________________________________________________
Name of (Arch)Diocese or Mission Group

(Note:  You may wish to make a copy of this blank form in the event that a substitute presenter is assigned.)