

## CERTIFICATE OF FAITH GROUP ENDORSEMENT

This is to certify that I have been informed of the application being made by

\_\_\_\_\_ *(name of applicant)*

for employment, or reappointment, as a chaplain or professional spiritual caregiver.

The above-named applicant is an ordained/commissioned/\_\_\_\_\_ person in  
*(other designation)*  
\_\_\_\_\_ and is in good standing.

\_\_\_\_\_ *(name of the faith group)*

The \_\_\_\_\_ have met with him/her and endorses  
*(appropriate person(s) or committee in our faith group)*  
him/her as a suitable person for ministry on behalf of our faith group and for Multifaith public ministry.

If selected for employment, our faith group grants approval for his/her involvement in this ministry and we will retain responsibility for his/her Practice of Leadership; including compliance with the Professional Ethical Standards, Oaths and/or Statements of Faith and Allegiance of our Faith Group.

The \_\_\_\_\_ to which he/she is now responsible  
*(appropriate person(s) or committee in our faith group)*  
in the structure of our faith group will meet with him/her every \_\_\_\_\_ to support his/her work.

**This endorsement is renewable every five (5) years or, whenever situationally required.**

\_\_\_\_\_   
Date

\_\_\_\_\_   
(Authority, signature)

\_\_\_\_\_   
(Faith Group Authority's name, printed)

\_\_\_\_\_   
(address)

\_\_\_\_\_   
(Postal code)

\_\_\_\_\_   
(phone)

\_\_\_\_\_   
(fax).

\_\_\_\_\_   
(e-mail)

**Please return to:**

**Canadian Multifaith Federation  
3570 Victoria Park Avenue, Suite # 207  
North York, Ontario, M2H 3S2  
Tel: (416) 422-1490  
Fax: (416) 422-4359  
www.omc.ca**

OMCSRC

02 June 2016