**MISSION TEAM**

**IN SUPPORT OF AN APPLICATION FOR A PLACE ON THE**

**WORSHIP SERVICE LEADER TRAINING COURSE**

**PART B: DETAILS OF THE PARISH AND INCUMBENT**

***This form is to be completed by the Incumbent***

Name of applicant:

Name of Incumbent:

Name of parish/benefice:

Church/es (including Fresh Expressions) at which the person will be invited to lead:

Types of service at which the person will be invited to lead:

Who will supervise this person once authorised, the Incumbent or someone else?:

What evidence do you have of the person’s Christian experience and biblical understanding?:

The date on which the PCC approved the resolution in support of this application:

**We agree to pay the fees of £120 *(or alternatively please comment if you have agreed with the individual for them to self-fund the course).***

Signed by the PCC Secretary: Date:

Signed by the Incumbent: Date:

*(electronic or typed signatures are sufficient)*