

Renewal Application Form – Lay Worship Assistant



Living the story. Telling the story.

This form is to be completed for each person applying for a **renewal** of their LWA Commendation. This renewal is valid for **3 years**. The completed form should be signed by the incumbent and the applicant. Details will be kept and used in accordance with our Data Privacy Policy.

Name of Applicant:	
Address:	
Postcode:	
Telephone:	
E-mail address:	
Parish/Benefice & Deanery:	

PCC Approval of Renewal	Date Approved by each relevant PCC:		
Enhanced DBS obtained	Children <input type="checkbox"/>	Vulnerable Adults <input type="checkbox"/>	
	Certificate Number:		
	Issue Date:		
Safeguarding Training Undertaken (enter date)	Basic Awareness	Foundation	Leadership

	Incumbent/Church Leader in Vacancy	LWA Applicant
Signed:		
Name in print:		
Date:		

Please return form to: **Training and Ministry Administrator, Mission Support and Ministry Development, Flourish House, Cathedral Park, Wells, BA5 1FD** with:

- Signed Data Privacy Form
- Copy of Ministry Specification