**Legion of Mary**

**APPOINTMENT OF PRAESIDIUM OFFICER**

**By a Curia, Comitium or Senatus**

Candidate should be interviewed by a Council Officer before the appointment is made.

 **Praesidium Parish**

**Name of Higher Council (Granting this Appointment)**

 **Name of officer to be appointed**:

**Office of Appointment** *(President, VP, Secretary or Treasurer)*

**Term of Office** *(First or Second)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date of Appointment**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Praesidium officers are appointed (not elected) by the council for a three year term, and eligible for another three year term but not to exceed two 3-year terms consecutively or more than six years in the same position.

**Signature of Spiritual Director** (if any) or **Praesidium President**:

By signing this document, the person above is aware of the qualifications of the person, and regards him as suitable for office.

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**Information *–* Appointed Officer**

 Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_

Home Phone Cell Phone Email

Officers must have already taken Legion Promise: Date Taken \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate length of time as a Legionary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does officer understand and is willing to perform the duties required for this office (in particular the requirement of attending the monthly council meeting?) Please check: Yes: or No

Signature of Appointed Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **By signing this document, I certify that I am a Catholic in good standing, and that I agree to accept to fulfill all the responsibilities of this office, foremost of which, is the regular attendance at the monthly Council Meeting.**

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 **Council Action (Filled out by Council Vice-President)**

Date Form Received by Vice-President

Signature of Council Vice-President\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date brought forward at Council \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Council Meeting No. \_\_\_\_\_\_\_\_

AP/9-01-16