

**DIOCESE OF MADISON
TESTIMONIAL OF SUITABILITY
FOR PRIESTLY MINISTRY**



Office of the Vicar General
702 S. High Point Rd., Ste. 225
Madison, WI 53719
Telephone: 608-821-3015

The Reverend _____ is seeking to exercise priestly ministry in the Diocese of Madison. In accordance with the guidelines approved by the United States Conference of Catholic Bishops, this document verifies that Father _____ is a priest of the Roman Catholic Arch/Diocese or Religious Community of _____ who is suitable for priestly ministry. Based on a review of his personnel file and my knowledge, I confidently attest to the accuracy of the following statements by certifying & initialing that:
[Please check each box and initial within the parenthesis each true statement below]

- ☐ () He is a priest canonically suitable for ministry.
- ☐ () He is not suspended or otherwise canonically disciplined.
- ☐ () No criminal charges have ever been brought against him, and he has no criminal record.
- ☐ () He has never behaved in such a way as to indicate that he might engage in sexual behavior inconsistent with priestly celibacy.
- ☐ () He has never behaved in such a way as to indicate that he might deal with minors in an inappropriate manner.
- ☐ () He does not have a current, untreated alcohol or substance abuse problem.
- ☐ () He does not have a current, untreated emotional or mental health problem.
- ☐ () He has never been involved in any incident, to my knowledge, which would adversely affect his performance as a priest.
- ☐ () He has participated in Safe Environment Awareness Training (e.g. VIRTUS).
- ☐ () A criminal background check has been completed with no concerns raised.
- ☐ () He has the habitual priestly faculty to hear confessions by virtue of office or by concession of the Ordinary.

Father _____ is a man of good moral character and reputation and is qualified to serve in an effective and suitable manner as a priest in the Diocese of Madison. I have no reason to suspect that the above-mentioned priest is unfit to carry out his priestly ministry. I fully endorse and support his celebration of the Sacraments, in particular the celebration of _____ at _____ Roman Catholic Church in _____, Wisconsin.

I unhesitatingly recommend that he be admitted to exercise priestly ministry in the Diocese of Madison under your authorization for the period of ____ day(s) beginning _____ to _____, 2025.

(Arch)Diocesan Seal

Signature

Title/(Arch)Diocese

Date