

Notification of a Planned Absence by a Priest from the Parish

(to be filed with the Chancellor for absences of one week or more)

Priest's Name _____

Parish(es): _____

Date of Departure _____ Date of Return _____ # of Days Away _____

The following arrangements have been made for sacramental & liturgical coverage:

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General Coverage: For emergencies (care of dying, funerals, etc.) during the week

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Weekend Coverage:

1st Weekend _____

2nd Weekend _____

3rd Weekend _____

4th Weekend _____

5th Weekend _____

Signatures: Priest _____ PPC Chair _____

Date: _____

Approved for Implementation: _____

(Signature of ORDINARY)

(DATE)