



Lay Carmelite Office

Telephone: (845) 344-2474
E-mail: laycarmelitesel@carmelites.com

TRANSFER REQUEST FORM (Community to Community within SEL Province)

Name _____ Date _____

Address _____

Phone # _____ E-Mail _____

Date of Reception _____ Date of Final Profession _____

I request to transfer FROM _____
Name of Community

in City and State _____

I request to transfer TO _____
Name of Community

In City and State _____

Reason(s) for transfer request: _____

Signature of Lay Carmelite making request: _____

Director (Current Community): _____
*signature

Phone /E-Mail _____

Director (New Community): _____
*signature

Phone /E-Mail _____

Regional Coordinator _____
*signature

If any of the parties involved has an objection to the transfer the Regional Coordinator should bring it to the attention of the Provincial Lay Carmelite Office.

When transfer is complete this form is kept in the files of new community, copy to the office.