



Lay Carmelite Office

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

REQUEST FOR A SPIRITUAL ASSISTANT

This sheet is to be completed by the Community Director.

Community Name _____

City/State _____ Date _____

We respectfully request that the following person be appointed as our Spiritual Assistant:

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ CELL PHONE _____

E-MAIL _____

Is this person a member of the Carmelite Order? _____

Carmel's Call – Provincial Statutes for the Lay Carmelites chapter 5: articles #3 & 4, and chapter 6: article #3 pgs. 74-77 explain the job description of the Spiritual Assistant.

Is this person aware of these documents? _____

With this in mind list briefly the services which this person would provide to the Lay Carmelite Community:

List any other information which would be helpful to the Provincial Delegate in making this appointment for your local Community:

Form completed by: _____

Phone: _____