Ontario Provincial Council of

The Catholic Women's League of Canada

Seminary Enrolment Verification Form for

Bishop Pappin Memorial Bursary Fund

Name of Seminarian: _____

Name of Seminary: _____

Address of Seminary: _____

The above seminarian received initial approval from The Ontario Provincial Council of The Catholic Women's League of Canada and with completion of this form we confirm that he is eligible for subsequent years of the bursary.

(If this is the seminarians' initial application to the bursary fund he must complete the full Application Form A3.1-03, *with all necessary information.)*

The above seminarian is still currently a seminarian studying here for ministry in a diocese in Ontario. He is considered a serious student with definite plans for ordination to priesthood.

I hereby attest to the accuracy and authenticity of this information.

Signature of Rector: _____

Date: _____

Comments if any:

Please return this signed form by email to:

Ontario Provincial Council of The Catholic Women's League of Canada at:

cwlontbishoppappinbursary@gmail.com

For further clarification or assistance, contact us at this address.