



## Archdiocese of Regina

### SCREENING COMMITTEE FORM

**Parish Name and Address:** \_\_\_\_\_

**Name of Pastor:** \_\_\_\_\_

**Pastor's Signature:** \_\_\_\_\_

The implementation of the Protocol for Volunteer Ministries includes the formation of a Parish Volunteer Screening Committee for every parish within the Archdiocese. In a smaller parish the Pastor and one other person may serve as the Parish Volunteer Screening Committee. Also, in smaller parishes, the Pastor may form only one Parish Volunteer Screening Committee for all of the parishes under his care.

Please complete this form and return a copy by regular mail or fax it to:

**Please email or mail a copy or fax this form to:**

Volunteer Screening Program  
Archdiocese of Regina  
200 - 2151 Scarth Street  
Regina, SK S4P 2H8  
Email: [sbender@archregina.sk.ca](mailto:sbender@archregina.sk.ca)  
Email: [lburkhart@archregina.sk.ca](mailto:lburkhart@archregina.sk.ca)  
Fax: 306-403-4810

**Parish Volunteer Screening Coordinator**

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

**Parish Volunteer Screening Committee Members**

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

*Attach a separate sheet if necessary.*