



Vacation and /or Absence from Parish Notification Form

Vacation Policy: DOCC-PASTORAL MANUAL - Sec. C-6, V.B.: "Priests are allowed one month (30) Days of vacation annually, which should be taken for their own health and well-being." The Diocesan Annual Retreat for Priests is not included in this total. This form is to be submitted for all extended absences from your parish or from your assignment (i.e. workshops, additional retreat days, leading a pilgrimage from your parish) *Going on a Pilgrimage is considered vacation.* Any additional vacation time MUST receive the PRIOR permission of the Bishop. (CIC 533.2)

Note: Where more than one priest is assigned to a parish, it is understood that agreement with the pastor has been reached as to the dates of vacations before submitting this form. Pastor's Approval _____ Date _____

This form is to be completed for each extended absence from the parish.

Name: _____ **Parish / Mission:** _____

Address: _____ **City:** _____

Will be absent from my assignment for the purpose of taking ___ Vacation or Other (specify) _____

Last day in Office / Work: _____ Absence Start Date: _____

First Day Back in Office /Work: _____ Absence End Date: _____

NUMBER OF DAYS REQUESTED: _____

DOCUMENTS REQUESTED as needed during time of absence from the diocese:

Letter of Suitability for Ministry Document

Celebret

THE FOLLOWING PRIEST IS IN CHARGE OF THE PARISH DUTIES DURING MY ABSENCE:

Does This Priest have Diocesan Faculties to serve in the Diocese? _____

Name: _____

Address: _____

Office Phone: _____ **Cell Phone:** _____

Priests who will be celebrating the Masses and Sacraments at the parish during my absence are:

Name: _____ **Does This Priest have Diocesan Faculties to serve in the Diocese?** _____

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MY EMERGENCY CONTACT:

In case of an emergency, I can be contacted at the following:

Email Address(es) that I will monitor during absence: _____

Cellphone(s) that I will use during my absence: _____

Signed _____ **Date** _____

Office Use Only

Chancery Office has recorded _____ days against your allowed 30 days of vacation for the calendar year _____.