**Legion of Mary**

**RATIFICATION OF A COUNCIL OFFICER**

**(By Comitium or by the San Francisco Senatus)**

**Council Name** **City and State**

**Name of officer to be ratified**:

**Name of Higher Council (Granting this Ratification)**

**Position (***President, VP, Secretary or Treasurer)*:

**Term of Office** *(First or Second)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date of Election (by Curia)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Council officers are elected by the council members and are presented for ratification to its next higher council). The officer can hold office for a 3-year term and is eligible for another three years, but not to exceed two 3-year terms consecutively or more than six years in the same position.

**Signature of Spiritual Director** (if any) or **Council President**:

By signing this document, the person above is aware of the qualifications of the person, was elected according to the Handbook rules by the council and regards him or her as suitable for office.

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**Information of Elected Council Officer**

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

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_

Home Phone Cell Phone Email

Officers must have already taken Legion Promise: Date Taken \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate Length of time as a Legionary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does officer understand and is willing to perform the duties required for this office (in particular the requirement of attending the monthly council meeting?) Please check: Yes \_\_\_\_\_\_ or No \_\_\_\_\_\_\_\_

Signature of Elected Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**By signing this document, I certify that I am a Catholic in good standing, and that I agree to accept, promote and declare the true teaching of our Catholic Faith and to fulfill all the responsibilities of this office, foremost of which, is the regular attendance at the monthly Council Meeting.**

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(**Council Vice-President)**

Date Form Received by Vice-President

Signature of Council Vice-President \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date brought forward at Council \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Council Meeting No. \_\_\_\_\_\_\_\_