

Sexual Misconduct Training

D12

To: The Bishop
The Commission on Ministry
The Standing Committee
The Episcopal Diocese of Colorado
1300 Washington Street
Denver, Colorado 80203

*I, _____, a candidate for the Ordination to the Diaconate,
Have successfully completed Diocesan Approved Sexual Misconduct Training on
_____. A copy of the Certificate of Completion is included.*

Date

Name of Student

Date