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**Extension of Reader/**

**Pastoral Worker Permission to Officiate (PTO)**

|  |  |
| --- | --- |
| **Name** |  |
| **Role - Reader/Pastoral Worker** |  |
| **Name of Parish and Deanery** |  |
| **Name of Incumbent** |  |
| **Date of first licensing** |  |
| **Date of last PTO** |  |
| **PTO extended until** |  |
| **Date of Ministry Agreement** |  |
| **Date of most recent DBS check** |  |
| **Dates of Safeguarding training completed***Note: completion of all four modules is a pre-requisite to PTO Renewal* |
| Basic | Foundation | Leadership | Raising Awareness of Domestic Abuse |

**Signatures:**

|  |  |
| --- | --- |
| Signature: | Date: |
| Incumbent:Date of PCC approval: | Date: |

**Once completed return this form and the Ministry Agreement to:** **karen.alsop@chester.anglican.org**