

Pastoral Associate  
For Leadership  
2025-2026 Formation Program  
Peer Recommendation  
(not a pastor or family member)

Please return this form by September 30 to [PAFormation@rcda.org](mailto:PAFormation@rcda.org) or:

Pastoral Associate Formation Program  
c/o Office for Discipleship Formation  
40 N. Main Avenue  
Albany, NY 12203

Office use only Date received _____
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(Name of applicant): \_\_\_\_\_ is applying to the Pastoral Associate for Leadership Formation Program in the Roman Catholic Diocese of Albany.

*Whereas recognizing and calling individuals to church ministry is a serious responsibility, we gratefully ask you to complete this form or write a letter of recommendation that addresses the following questions about the applicant:*

1. How long and in what capacity have you known the applicant?

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2. What do you see as this person's skills, talents and gifts?

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3. How have these gifts been used in a program or service activity in which you and the applicant have worked together?

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4. Do you have any additional comments which you think might be helpful (please share):

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Click below on desired answer.

Yes

No

5. May we contact you with any further questions?

6. May we share your comments with the applicant?

Your name:

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Email address:

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Phone:

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Postal address:

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Signature:

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Date signed:

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**PRINT**