

Office of Faith Formation and Lay Ecclesial Ministry

Directory for Catechesis

**APPLICATION FOR DIOCESAN CERTIFICATION**

1. Title (circle) Brother Deacon Dr. Miss Mr. Mrs. Ms. Reverend Sister

Phone Phone

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home/Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish of membership\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish/School of Ministerial Service \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish/School City

Indicate any other name used for your records:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Indicate your Ministry Role(s): Should you serve in more than one area, note with an \* your primary

ministry (higher percentage of time). Only one certificate will be issued.

|  |  |
| --- | --- |
| \_\_\_\_ Adult Faith Formation Minister | \_\_\_\_ Parish Adolescent Catechist |
| \_\_\_\_ Campus Minister | \_\_\_\_ Parish Coordinator of Faith Formation |
| \_\_\_\_ Catholic Elementary School Religion Teacher | \_\_\_\_ Parish Coordinator of Youth Ministry |
| \_\_\_\_ Catholic High School Religion Teacher | \_\_\_\_ Parish Director of Faith Formation |
| \_\_\_\_ Catholic School Assistant Principal | \_\_\_\_ Parish Director of Youth Ministry |
| \_\_\_\_ Catholic School Principal | \_\_\_\_ Parish Elementary Catechist |
| \_\_\_\_ Christian Initiation Minister | \_\_\_\_ Parish Elementary Principal |
| \_\_\_\_ Diocesan Office of Catholic Schools Staff | \_\_\_\_ Pastoral Associate |
| \_\_\_\_ Diocesan Office of Faith Formation and Lay Ecclesial Ministry Staff | \_\_\_\_ Pastoral Minister |
|  |  |

3. This application is for (check one):

\_\_\_\_\_One-Year certificate \_\_\_\_\_Renewal of One-Year (maximum of 4 renewals)

\_\_\_\_\_Four-Year certificate \_\_\_\_\_Renewal of Four-Year Certificate

\_\_\_\_\_New Employee - Hire Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Complete the List of Courses attended since your last certificate on the other side of this application form.

Also include the signatures of applicant and administrator.

Return to:

Office of Faith Formation ***$15.00 PROCESSING FEE MUST ACCOMPANY THIS FORM***

and Lay Ecclesial Ministry Make checks payable to: Office of Faith Formation and Lay Ecclesial Ministry

225 Elm Street Youngstown, OH 44503

(330) 744-8451

*Do Not Write Below*

Type of certificate granted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 1 year \_\_\_\_\_ 4 year \_\_\_\_\_

Approved by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Valid\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# E-5

2023

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| PLEASE NOTE:  All components of the Diocese of Youngstown Safe Environment Policy for the Protection of Children and Vulnerable Adults must be fulfilled and submitted on the Compliance checklist to the Safe Environment Coordinator by the parish or school compliance officer. No applications will be processed until compliance is verified. | | | | | | | | | | |
| 5. Certificate or Renewal of Certificate requiring Clock Hours | | | | | | | | | | |
| Course Title | | Date | Location | | | Instructor | | | Clock Hours | |
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| Total | | | | | | | | |  | |
| 6. Certificate or Renewal of Certificate requiring College Hours from a Catholic college or university. Please provide transcripts. | | | | | | | | | | |
| Course Title | | Date | College or University | | | Instructor | | | College Hours Semester/Quarter | |
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| Total | | | | | | | | |  | |
| 7. Record of College Degree(s). | | | | | | | | | | |
| Degree | | Date | College or University | | | Major | | | College Hours Semester/Quarter | |
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| total | | | | | | | | |  | |
| 8. Signature of applicant:  “The information on this application is accurate and lists the formational experiences in which I have participated. I attest that I am a practicing Catholic and over twenty-one years of age. I will strive to serve as a minister in accord with the policies of the Diocese of Youngstown.” | | | | | | | | | | |
|  | Signature of Applicant | | | | | |  | Date | |  |
| 9. Signature of your immediate supervisor (Pastor, PDRE, Pastoral Minister, School Principal):  “I affirm that the applicant serves in ministry at this parish or school. The applicant is a practicing Catholic, is suited for this ministerial role, and is over twenty-one years of age. The information on this form is an accurate reflection of the formational experiences in which the applicant has participated. | | | | | | | | | | |
|  | Signature of Administrator | | | | | |  | Date | |  |
|  | | | | |  | | | | |  |
|  | Title | | |  | Parish/School | |  | City | |  |

E-5

2023

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2009

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2009