

ST. JOHN VIANNEY CATHOLIC CHURCH
Religious Education 2008-2009

CATECHIST/HELPER APPLICATION

NAME _____ DATE OF BIRTH _____ / _____
Month / Date

ADDRESS _____
Street City Zip Code

PHONE HOME _____ CELL _____

EMAIL _____

OCCUPATION _____

I would like to volunteer as

_____Teacher _____Teacher Assistant

_____Substitute _____Office Helper

_____Social events _____Fundraising

In Saturday session

_____Session 1 9:00 – 10:30 am English

_____Session 2 11:00 – 12:30 pm English

_____Session 3 1:00 – 2:30 pm Spanish

Please circle grade preferences K 1 2 3 4 5 6 7 8

Child Special Needs, Learning Disability experience _____Yes _____No

Certified Catechist _____Yes _____No If yes, on what year? _____

Years of Catechetical Ministry _____

GRADE ASSIGNED _____ SESSION _____ ROOM _____