Lay Ecclesial Ministry Formation

Church Ministry Application

Catholic Diocese of Saginaw
5800 Weiss St
Saginaw MI 48603

Lay Ecclesial Ministry Formation
Application Procedures and Costs:

1. Discuss your interest in ministry formation with the Pastor/Director of Parish Life of your parish.

2. Contact the coordinator of the Lay Ecclesial Ministry Formation for an initial interview. Together, the applicant and coordinator will determine whether to pursue admission into the formation process.

3. If continuing, complete the application forms as directed below.

4. Within one week of the initial interview **(Date: _____)**, submit:

   - ✞ Completed application
   - ✞ Life History Questionnaire (see page 7)
   - ✞ Names and addresses of four people, whom the coordinator will contact requesting a letter of recommendation
   - ✞ $40 application fee (check payable to the Diocese of Saginaw)

5. Complete and submit a written (preferably typed) autobiography which contains:

   a. Significant events of your life (birth, family, events important to you)
   b. Any specialized training you have had
   c. A brief story of your spiritual journey
   d. Reasons for seeking admission into the Lay Ecclesial Ministry Formation

6. Obtain and submit certificates of Baptism, Confirmation, Marriage; or if applicable, a copy of the final Decree of Nullity.

NOTE: There is a process for the Admissions Committee, so please return all the above mentioned items as soon as possible for us to begin this process.

Send all the information to: **Office of Parish Life and Evangelization**
Coordinator of Lay Ecclesial Ministry
5800 Weiss Street
Saginaw MI 48603-2762

7. The coordinator will request a recommendation from the Pastor/Director of Parish Life.

8. Before an applicant is accepted, he/she is required to undergo a psychological interview. The coordinator will provide you with the name, address, and phone number of a licensed counselor. Please contact this person to schedule an appointment. The diocese will pay for the evaluation.

9. A member of the Admissions Committee will visit the applicant and spouse, if married, in their home.

10. The Admissions Committee will recommend acceptance to the program or advise a deferral. The applicant will be notified of the decision after it is made.

Costs and Payment Options

1. Program Costs

Cost of the program for a Church Ministry candidate is $720 per year for the first two years of formation. The cost is divided between the sponsoring parish and the candidate. The parish pays $360 and the candidates pays $360 each year for two years. (which can be paid in nine installments of $40 per month).

Program costs include:

- Class sessions
- Meals, coffee, tea, beverages, etc.
- Handout materials
- Consultation services
- Overnight accommodations as needed

Program costs do not include:

- Course textbooks
- Cost of retreats

2. Method of payment

Each candidate will receive a monthly invoice from the Finance Office of the Diocese of Saginaw until the candidate's share of the program costs are paid in full. (If the program cost presents a difficulty or financial strain, please contact the program coordinator to discuss options.) All payments must be sent to the Finance Office.

PERSONAL INFORMATION

First Name _____ Last Name _____

Maiden Name (if applicable) _____ Nick Name (if applicable) _____

Address _____

City _____ Zip _____

Home Phone (____)_____ Business Phone (____)_____ Cell Phone (____)_____

Emergency Contact:

Name:_____ Number:_____

Relationship to applicant:_____

☐ I do not have e-mail

☐ I have e-mail that can be used: _____

Date of birth: _____ Place of birth: _____

Marital Status: (please check) ☐ Married ☐ Single ☐ Divorced ☐ Remarried

Occupation: _____

Place of Employment: _____

With whom are you now living? (list people)

Children – Name(s) and Age(s):

_____ _____

_____ _____

_____ _____

Parish _____ Pastor _____

Employment Data

Employer	Position Held	From	To

Educational Data

Grade School _____ City, State _____

High School _____ City, State _____

College _____ City, State _____

Degrees Received/Credit Hours Earned:

_____

_____

_____

_____

List any significant classes or workshops you have taken in the last 10 years:

Organizations

List parish and/or civic organizations in which you have been involved:

List your current ministry at your Parish:

Additional Information

If you are married, does your spouse support your desire to enter the formation process?

☐ Yes ☐ No Comment:

Additional comments that you think may be helpful:

LIFE HISTORY QUESTIONNAIRE

A. List your five main strengths:

1. _____
2. _____
3. _____
4. _____
5. _____

B. List your five main weaknesses:

1. _____
2. _____
3. _____
4. _____
5. _____

C. Present interests, hobbies, and activities:

D. What do you do in your free time?

Occupational Data

A. What kind of work are you doing now?

B. What kinds of jobs have you held in the past?

Marital History

A. How long have you been married? _____

B. Personality of spouse (in your own words):

Family Data

A. Give an impression of your home atmosphere (i.e. home in which you grew up):

B. Give an outline of your religious training:

C. Who are the most important people in your life?

D. List the benefits you hope to achieve from the Lay Ecclesial Formation:

E. List any concerns you may have about the Lay Ecclesial Formation:

Self-Description

A. I am a person who:

B. All my life:

C. Ever since I was a child:

D. One of the things I feel proud of is:

E. It is hard for me to admit:

F. One of the things I cannot forgive is:

G. One of the things I feel guilty about is:

H. If I did not have to worry about my image:

I. One of the ways people hurt me is:

J. If I weren't afraid to be myself, I might:

K. One of the things I am angry about is:

L. One of the ways I could help myself but don't is:

What personal characteristics do you feel are necessary for a person striving to live the lay vocation of Church Ministry?

Give a word-picture of yourself that would be described:

a. By yourself: _____

b. By your spouse (if married): _____

c. By your best friend: _____

d. By someone who dislikes you: _____

Health History

Do you have a personal physician? Yes ☐ No ☐

Month/year of last exam: _____

Please tell us about any physical limitations that would impact your ability to attend and fully participate in the weekend seminars and completing the assignments:

Please tell us about any psychological health issues you may have experienced:

Letters of Recommendation

Please list the names and addresses of four people who are willing to write a letter of recommendation for you:

(Please Print)

1. ☐ _____

_____

_____

Email:

2. ☐ _____

_____

_____

Email:

3. ☐ _____

_____

_____

_____

Email:

4. ☐ _____

_____

_____

_____

Email:

_____ _____

Signature Date

Please include a recent photograph of yourself.
It can be a family photo that you are in.

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