

Certificate in Adult Formation Leadership Application

First Name _____ M.I. _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Parish _____

Role in Parish _____

Highest Level of Education _____

Degree/Institution _____

Primary Experience in Catechesis _____

_____ Years Experience _____

Occupation/Organization _____

Reason for Applying to the Certificate in Adult Formation Leadership Program

PRINT Contact Information:

Home Phone _____ Office Phone _____

Mobile Phone _____ Email _____

I would like to apply for the Certificate in Adult Formation Leadership. I have read and understand the commitment that will be required. I understand that I must submit an application and a signed Student Learning Contract and pay advance tuition directly to VLCFF at time of registration.

Signature _____ Date _____

12. You will be graded by your Instructor on a scale of: Good, Very Good or Distinguished for each course. You are responsible for resolving any questions or issues involving grades with your Instructor and/or VLCFF.
13. Upon the satisfactory completion of the Program, you can apply for a Certificate of Completion in Adult Formation Leadership from VLCFF University of Dayton.
14. The completion of the AFL or any other VLCFF Certificate Program does not alone qualify a student for master catechist status. (See *Communicating the Catholic Message*, for all requirements.)

Student Acknowledgement: By signing this Learning Contract, the student agrees to comply with all program requirements.

Signature_____Date_____

*Email completed application to Michele McHale-Pickard: mmchale-pickard@archatl.com
Rev. March 2024*