

Certificate in Youth Ministry 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 Youth Ministry Program

Contact Information:

Home Phone _____ Office Phone _____

Mobile Phone _____ Email _____

I would like to apply for the Certificate in Youth Ministry Program. I have read and understand the commitment that will be required. I understand that I must submit a signed Student Learning Contract and payment for advance tuition payment or pay by credit card directly to VLCFF.

Signature _____ Date _____

Attach Student Learning Contract and email to Michele McHale-Pickard: mmchale-pickard@archatl.com

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 Youth Ministry Program, you will receive a Certificate of Completion in Youth Ministry from VLCFF University of Dayton.
14. You may explore the possibility of applying for Master Catechist Certification in Youth Ministry from the Archdiocese of Atlanta when all other requirements have been fulfilled. (See *Communicating the Catholic Message* for additional 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*