PLEASE DELIVER THIS APPLICATION TOGETHER WITH A LETTER OF RECOMMENDATION FROM A PERSON OF MINISTRY COLLEAGUE NO LATER THAN APRIL 30, 2021

1. Complete this application and return it to the address provided on the last page.
2. Submit the Letter of Recommendation form from a colleague in the ministry who is a layperson (not a priest or deacon).
3. The Colleague must fill out and submit his/her recommendation letter separately from your application.
4. After returning this application, if applicable, this office will send the Approval Form to your pastor as well as a copy of your application.
5. Please understand that we cannot and do not necessarily accept all applicants.

Eligibility Requirements

1. Adult, 24 years of age or older
2. Be a practicing Catholic for at least three consecutive years or more
3. Be active in church ministry for at least one year
4. Be supported by your pastor. Once again, we will send your pastor the Approval Form, not you
5. Being in good physical and mental health
6. Posses a deep and genuine desire for spiritual formation
7. Be open and interested in contemporary expressions of theology
8. Have sufficient time for training and ministry
9. Have the desire and willingness for growth, continuing education and skill development for the ministry
10. Possessing reading and writing skills to fully participate in the academic program
11. Must be baptized; confirmed; First Eucharist (First Communion)
12. Have taken the VIRTUS Protecting Gods Children Awareness Session and at least begun reading the newsletters associated with this https://renodiocese.org/safe-environment/
13. Having been approved by the diocese through the background check form
14. Training, as well as all materials, presentations, etc. will be in Spanish
15. Contact laurianner@catholicreno.org for program information in English.
FILL OUT THIS FORM COMPLETELY. REMEMBER THAT PRAYER IS PART OF THE TRAINING PROCESS
PLEASE WRITE CLEARLY

I. OVERVIEW

1. Legal Name: ____________________________________________
   Last Name           First Name

2. Preferred Name (as you want us to call you): __________________________

3. Current Parish: _____________________________________________

4. Preffered Contact Number __________________ Other __________________

5. E-mail (personal or work) __________________________________________

6. Address: ______________________________________________________

7. City __________________ State __________ Zip Code __________

8. Date of Birth: ______/____/_____ Place of Birth: _______________________

9. Marital Status: Single ____ Married ___ widowed ____ Divorced ____ Separated ______

10. Name of Your Spouse: _____________________________________________

11. Can we give your phone number, email, home address to the other participants in the program? Yes No

12. Do you regularly read and review your emails? Yes No

13. Have you ever participated in the Annual Diocesan Conference? Yes No
II. RELIGIOUS HISTORY

1. Are you baptized Catholic? __________________________________________________________

2. If you were not baptized Catholic, please write down the year you became Catholic and briefly explain why you became Catholic:

3. Have you celebrated your First Communion/First Eucharist? ____________________________

4. Have you been confirmed in the Catholic Church? Yes / No

5. Have you been out of the practice of the Catholic Church faith for more than 3 years? Yes / No

6. Have you been in the seminary or religious community? Yes / No
   If you have been, please explain briefly and why you are no longer participating

PARISH AFFILIATION

1. Number of years in your parish actual__________________________________________________

2. Parish that is sponsoring you__________________________________________________________

3. How long have you lived in the Diocese of Reno? ____________________________

4. How long do you expect to stay in the Diocese? _________________________________________

III. Finance

1. The cost of the program is $450 per year. A security deposit of $150 is required. Deposit must be paid before the first class. This deposit is non-refundable. (You will be notified of your acceptance into the program by August 9, 2021).

2. Who will pay your tuition?
   □ My parish (talk to your parish priest)
   □ Myself
   □ Between myself and my parish
IV. MARRIAGE AND FAMILY
1. ____ Married
2. ____ Single
3. **If you are married**, have you and your wife discussed your entry into the Training Program and ways you can prioritize time?

4. Have you discussed this commitment with your sons and daughters and other family members? **Yes / No**

V. Work
1. Profession / Occupation __________________________ Number of Years ______
2. I am currently _____ Employed _____ Self-employed _____ Retired

VI. Health
1. What is your overall health?
2. Describe any physical disability or chronic illness that may require a Special consideration.

VII. Education
1. Circle the highest degree you completed:

   Grade school______ Middle school ____ High School_______ College/ University________

2. Graduation Dates:
   Grade school______ Middle school ____ High School_______ College/ University________

3. If you took courses at a College/ University, what is your Title?
   ________________________________________________

4. Name of the school where you took the courses of your highest educational level:
   ________________________________________________

5. In addition to assistance and active participation in the class, the Lay Ministry's Training and Leadership program requires:
• about 10-12 hours of theological reading per month
• written reflection documents to be delivered in the next class
• a pastoral project, approved by its pastor and the director of P.F.M.L.L
• find best practices in other parishes/places for your project
• lead the group in prayer, as part of a team, following the instructions given.
• Is any of this a concern for you? Yes / No
• If yes, please explain:

5. Do you master a language other than your original language?

____________________________________

7. What are some skills or training you have obtained?

VIII. FORMATION

1. One of the objectives of this program is to build a community of faith among members. Some of the activities may be aimed at achieving this goal.

   a. Is this aspect of training valuable to you? Yes / No

2. Have you taken Bible courses? Yes / No

   a. What courses have you taken?

   b. Mention the Institution or Group:

3. Have you taken the Temperament/ Myers-Briggs indicator? Yes No

4. Have you taken Emergenetics? Yes No
IX. Participation in other Training Programs: (Check all that apply)

☐ Certification as Catechist
☐ Charismatic Renewal
☐ Christianity Courses
☐ Training for the Lay Ministry (Diocese of Reno)
☐ Prayer and Life Workshops
☐ Marriage Meeting
☐ Withdrawals
☐ Why Catholic?
☐ Others (Please describe)

X. Ministry

Please select the ministries in which you are currently involved. Then place a star (*) in the **ONE** that is most meaningful to you in your life.

☐ Catechist
☐ Religious Education
☐ Hispanic Ministry
☐ Coordinate the Liturgy
☐ Reader
☐ Minister of Communion

CONTINUES MINISTRY

☐ Music
☐ Evangelization
☐ Pastoral Council/Parish
☐ Committee / Parish School
☐ RICA Team
☐ Sacristan
☐ Social Justice
☐ Prison
☐ Youth Pastoral
☐ Teens
☐ Confirmation
☐ Other (Please describe)
1. In which of the activities mentioned above do you have a leader / director role?

2. Other comments on your past/present ministerial participation that you want us to know about:

3. In one or two sentences, answer the question "Who is a leader?" You can use your own words or you can quote someone else. If you're quoting someone else, be sure to indicate who you're quoting.

4. How would you like the Church in our Diocese to be in 10 years?

5. Please put an X in prayer that best describes your participation in the ministry as a call from God:
   - [ ] I feel that what I'm doing is a call from God
   - [ ] I do not feel that my participation is a call from God

6. Please put an X in the sentence that best describes your sense of connection with the diocese and other parishes in the diocese:
   - [ ] I feel very connected to the diocese and other parishes
   - [ ] I feel somewhat connected to the diocese and other parishes
   - [ ] I do not feel very connected to the diocese and other parishes
7. "My ministry gives me the opportunity to:"

8. What is one of the goals you have when joining this training process? What do you hope to achieve by participating? What are you looking for? You must have at least 1 goal and must be measurable in some way.
   - Enter your goal:
   - How will you measure it in the end to see if you've made it?

9. In addition to your goal, what else do you want to achieve from this program? Why do you want to do it?

10. Briefly tell us anything else you'd like us to know:
11. How did you hear about this program? (Circle all that apply)

☐ Spoke with someone who has already participated in the program
☐ Diocesan announcements
☐ Parish bulletin
☐ The priest recommended it to me
☐ Other

Conclusion

The Ethnic Ministry Office adheres to a policy of strict confidentiality of registrations. This application and all other information received will be kept confidential and disclosed only to persons associated with the application process.

I certify with my signature that the information in this application is true and complete according to what I know and understand. I understand that any misrepresentation of facts may be sufficient cause to refuse admission.

I give permission to the Training Team of the Lay Ministry and Leadership to contact my pastor, as well as any other reference related to this application, if necessary.

I have completed the Safe Environment training program and a background check through the diocese.

I understand that the completion of this training process for lay ministry and leadership does not guarantee me a job in this Diocese or anywhere else.

I will not record any videos without the presenter's permission.

I understand that the use of cell phones during sessions will be limited and I will comply with the rules.

I understand that the publications of the speakers' presentations will be for the use of the participants only.

I understand that my photo can be used digitally, online or printed, with my name on it.

__________________________________________  _________________________
Signature of the Applicant                        Date

More on the next page
Contact information of the sponsoring pastor (or other, if not a parish-related ministry):

Name: ________________________________________________________________

Email: ______________________________________________________________

Phone number: _______________________________________________________

The full application must be received by April 30, 2021. Send it to:

❖ Mail:
  Maripaz Ramos
  Lay Ministry Formation and Leadership Program
  Diocese of Reno
  290 S. Arlington Ave
  Reno, NV 89501

❖ Email to: maripazr@catholicreno.org
❖ Fax: 1-775-382-1035