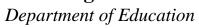
Diocese of Green Bay

Catechetical Certification On-Going Formation





Ongoing Formation Completion Record

						ne:
Name			Phone	E-ma	il:	
Address				City	Zip	La
Parish/Scho			Location			Last, First
I am currently a:		[] RE Administrator [] Catechist [] School Administrator [] School teacher [] Other				
This record pertains to: Ongoing Formation (coursework for Ongoing Formation must have pre-approval from the Dept. of Education).						
Name of Course:						
Attendance: (fill according to your specific number of classes)						
Session	Date	Time	Location		Instructor	Instructor, please initial here:
Session 1						initial fiere.
Session 2						
Session 3						
Session 4						
Session 5						
Session 6 Session 7						
Session 8						
Session 9						
Session 10						
I have attended all the sessions as listed above, completing the entire course/retreat as required and verified by the instructor above. Signature of Applicant Date						
Please send this record to For Office Use Only: Dept. of Education Ap						approval
Catechetical Certification Department of Education P. O. Box 23825 Green Bay, WI 54305-3825			Approved by: Signature Date:			