



Diocese of Trenton
CERTIFICATE IN CATECHESIS APPLICATION

Catechist's Name: _____
(Please PRINT or TYPE name. Your name will appear on your certificate exactly as it is here.)

Address: _____
Street Town State Zip

Phone: _____ Cell Phone: _____ Email: _____

Parish Where You are REGISTERED: _____
CITY: _____ Parish Phone: (____) _____

Are you a Catholic School Teacher: YES NO
If Yes, Name of School: _____ Town: _____

I am currently serving as a catechist in *(Check all that apply)*

- Parish Religious Education Program
Parish Name: _____ Town: _____
- Catholic School Religion Class
School Name: _____ Town: _____
- Holy Innocents Society/SPRED
Site Name: _____ Town: _____

Intended Process to obtain the Certificate in Catechesis

Theology Component: *(Check only one)*

- Notre Dame STEP: Core Course *(Parish Catechists Only)*
- Notre Dame STEP: Catholic Faith & Tradition *(Catholic School Teachers Only)*

Methodology Component:

- The Art of Teaching Catechesis (Parish Catechists Only)*

Catechist's Signature: _____ **Date:** _____

Pastor/PCL/Principal's Signature: _____ **Date:** _____