



CATHEDRAL OF THE BLESSED SACRAMENT RELIGIOUS EDUCATION PROGRAM

Volunteer Ministry Application

Please complete both pages.

CATHEDRAL
OF THE
BLESSED SACRAMENT

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
Cell Phone	

Availability

During which hours are you available for volunteer assignments?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

Interests

Tell us in which areas you are interested in volunteering.

- Administration
- Events
- Teaching
- Teacher's Assistant
- Fundraising
- Operations
- Phone bank
- Newsletter production
- Volunteer coordination

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. If you are interested in teaching, please summarize your teaching experience and provide copies of the Formation Credits you have earned.

Previous Volunteer Experience

Summarize your previous volunteer experience.

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Parish to Which You Currently Belong

Name of Church	
Street Address	
City ST ZIP Code	
Phone	

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

References (one should be your Pastor)

Phone

	Phone
1.	
2.	
3.	

IMPORTANT! Please attach a recent copy (issued within the last 6 months) of your Baptismal Certificate. This may be obtained from the parish in which you were Baptized. You will not be assigned to a classroom or given an assignment until we receive this certificate.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

TO SUBMIT YOUR APPLICATION:

Print and mail this completed form to: **Genevieve Aldeghi, FDCC, Director of Religious Education, Cathedral of the Blessed Sacrament, 1017 11th Street, Sacramento, CA 95814.**

God Bless you for responding to God's call to minister in this program. **You will be contacted to schedule a convenient time for an interview.**