

St. Kilian Church
Office of Religious Education
VOLUNTEER APPLICATION

Thank you for your interest in helping with our Religious Education Program. Faith Formation is an ongoing process. We encourage anyone who likes to work with children to think about becoming involved with this rewarding ministry.

We are currently using the **BLEST ARE WE** series, published by **Silver Burdett Ginn Religion**. This series has been approved by the Conference of Catholic Bishops and has the Imprimatur.

All volunteers are required to be fingerprinted through the diocese and take an on-line Safe Environment Training. Once accepted, you will be notified of the next opportunity to be fingerprinted and given the information about the online training.

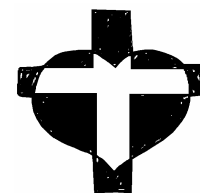
Below you will find the schedule for Pre-K & Kindergarten, Grades 1-8 and Special Education. Please complete the attached application with your preference of grade level or day of the week that is best for you.

Return the completed application to the Office of Religious Education. Someone from our office will contact you and set up an appointment to meet.

Grade	Day	1st Class	Time	Grade	Day	1st Class	Time
Kindergarten (4 & 5 year olds)	Sunday	Oct. 2, 2011	9 AM				
<u>1st</u>	Monday	Oct. 3, 2011	3:30-4:45 PM	<u>5th</u>	Monday	Oct. 3, 2011	5-6:30 PM <i>Twice a month</i>
<u>2nd</u>	Tuesday	Oct. 4, 2011	3:30-4:45 PM	<u>6th</u>	Tuesday	Oct. 4, 2011	5-6:30 PM <i>Twice a month</i>
<u>3rd</u>	Wednesday	Oct. 5, 2011	3:30-4:45 PM	<u>7th & 8th Combo</u>	Wednesday	Oct. 5, 2011	5-6:30 PM <i>Twice a month</i>
<u>4th</u>	Thursday	Oct. 6, 2011	3:30-4:45 PM				
Special Ed.	Friday	Oct. 7, 2011	4:30-5:30 PM				

Marcia Burns
Cindy Hurley
Jan Inano
Angie Bonilla

Director of Religious Education
Coordinator of Religious Education
Secretary
RE Assistant



RE Office (949) 586-4550

FAX (949) 454-1043

E-MAIL skre@cox.net

www.stkilianchurch.org

ST. KILIAN RELIGIOUS EDUCATION VOLUNTEER

REGISTERED PARISHIONER? _____ years in parish _____ previous parish _____

NAME _____ Birth Date ____/____/____
last first

ADDRESS _____
street city zip

TELEPHONE (home) _____ (work) _____

E-MAIL please print _____ CELL PHONE _____

OCCUPATION _____ COMPANY _____

MARRIED _____ SPOUSE _____
yes or no first name last name

EDUCATION: High School _____ College _____ Major _____ Other _____
yes/no yes/no

Your children's names ages currently enrolled in our program?
1. _____
2. _____

GRADE LEVEL or DAY and TIME that you are interested in _____

DO YOU PARTICIPATE IN MASS? _____ (daily/weekly/other)

OTHER PARISH ACTIVITIES _____

COURSE WORK or experience related to Religious Education _____

SPECIAL GIFTS or TALENTS that might benefit our program (crafts, art, dance, music, storytelling, etc..)

REFERENCES:

Name	phone	relationship
1. _____		
2. _____		

****Please describe in a short paragraph (you may use the back of this paper):**

1. Your own experience of Religious Education
2. How you hope to touch the lives of our parish children through this ministry