



TOTUS TUUS

SUMMER CATECHETICAL PROGRAM



2018 Returning Team Member Application

Basic Information:

Name _____

Current Address _____

City _____ State _____ Zip _____

I can be reached at the above address until ____/____/____, then write to:

Address _____

City _____ State _____ Zip _____

Cell Number _____

Email _____

Education:

<u>School Name</u>	<u>Location: City & State</u>	<u>Years Attended</u>	<u>Graduation Date (mo/yr)</u>	<u>Degree/Certificate (I.E., BS, BA, etc) and Field(s) of Study</u>
High School				
College				
Graduate School				
Seminary				

Volunteer History:

Please document the last volunteer position you held.

Organization Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Supervisor _____

Duties _____

Parish Involvement:

Current Parish _____

Pastor at the Parish _____

Phone Number for Pastor/Parish _____

Talents and Gifts

Please fill in the areas that apply.

1) What special talents or gifts do you have that will benefit the Totus Tuus Program?

2) If you play an instrument and/or speak Spanish, please complete the following:

Instrument	# of years	Skill level (Beginner, intermediate, advanced)
_____	_____	_____

Spanish studied?	# of years	Skill level (Beginner, intermediate, advanced)
_____	_____	_____

Would you consider yourself fluent in Spanish? _____

Catholic Formation:

1) What do you value about being Catholic?

2) Describe your current life of prayer (when, how, what, etc.).

3) Are there any teachings of the Catholic Church with which you have difficulty?

4) Based on your previous involvement with Totus Tuus, what needs to be done to improve the program?

Have you applied or taught Totus Tuus for any other diocese? If so, where?

Applications are to be emailed to Sister Barbara Ellen at barbsj@salinadiocese.org or mailed to the address below, **NO LATER THAN February 3, 2018.**

Totus Tuus
Catholic Diocese of Salina
103 N. Ninth Street
Salina, KS 67401