
**Certificate in Youth Ministry Studies
Application Form**

Each applicant must a) complete the following background information; and b) submit two reference forms, either from your employer, someone you work with, from your pastor/church leader, OR from a co-worker in ministry.

Name _____ Date _____

Address _____
(Street #, Street, City/Town, Province, Postal Code)

Phone # _____ Email _____

School/Board/Parish/Diocese _____

_____ Bus Phone _____

Current Ministry Responsibilities _____

In what ministries are you currently engaged in at your parish/school? _____

Current Occupation (if not church ministry) _____

A) PERSONAL INFORMATION: Please describe yourself in 20-25 words.

B) MINISTERIAL EXPERIENCE: Describe briefly your involvement in youth ministry and the number of years involved.

C) **GIFTS AND TALENTS:** Describe the qualities, gifts and talents which you bring to ministry with youth.

D) **MOTIVATION:** Please describe why you want to participate in the Youth Ministry Certificate Program.

E) **APPLICATION OF YOUR LEARNING:** What are your personal expectations for what you want to achieve through the program? How will you apply your learning in the program to your ministerial and home setting?

F) EDUCATIONAL HISTORY: Describe briefly your formal educational background (high school, college, university, professional development...)

NAME/LOCATION OF SCHOOL	ENTERED MO/YR	DEGREE CONFERRED	DATE OF CONFERENCE

G) MINISTRY FORMATION: List *formal* learning experiences (i.e. courses, workshops, conferences, other professional training/development) and *informal* learning experiences (reading, video programs, cassette programs) that have contributed to your learning about the following topics. BE SPECIFIC!

THEOLOGY (study of Jesus, the Church, the Trinity, etc.)

SCRIPTURE

MORAL THEOLOGY

JUSTICE, SERVICE AND PEACE

PRAYER/SPIRITUALITY

HUMAN RELATIONS SKILLS _____

COUNSELLING SKILLS _____

LEADERSHIP THEORY/SKILLS _____

YOUTH MINISTRY _____

Please return to:

*Certificate in Youth Ministry Studies
Continuing Education Division—USMC
81 St. Mary Street, Toronto, ON M5S 1J4*

OR fax to: 416-926-7287

OR email to continuinged.stmikes@utoronto.ca