



ARCHDIOCESE OF INDIANAPOLIS

The Church in Central and Southern Indiana

Application for the Lay Ministry Formation Program

Name _____
(Last) (First) (middle)

Address _____

E-mail address _____

Phone: office _____ home _____

Mailing address (if different from above) _____

Parish of which you are a member _____

Parish or institution of your ministry _____

Significant responsibilities _____

Full time (35 hours/week or more) _____ Part-time (20-35 hours/week) _____

Part-time (Less than 20 hours/week) _____

I receive a salary/stipend for my ministry. ____ yes ____ no

Educational Background

Name of School	Address (City and State)	Circle Last Year Completed	Degree
High School		1 2 3 4	
College		1 2 3 4	
Graduate Work		1 2 3 4	
Technical		1 2 3 4	
Other		1 2 3 4	

Use additional sheets as needed to answer these questions.

Summarize your experience in lay ministry, including previous responsibilities and number of years in each position.

Why do you want to participate in the Lay Ministry Formation Program?

What are your expectations of this program?

What are your goals and needs in the areas of theological study, pastoral skills development and spiritual formation?

What formal preparation for ministry have you completed in the areas of spiritual formation, pastoral skills development and theological study?

Describe your theological understanding of and vision of the church and its ministry. Please describe the major influence on your thinking.

How do you plan to balance your personal life, your ministry responsibilities and your formation requirements if you undertake this program?

What level of support do you have for this program from your pastor or parish life coordinator or secretariat head, your coworkers, your family?

Do you have a spiritual director with whom you meet at least quarterly? ____ yes ____ no

Do you participate in an annual retreat? ____ yes ____ no

What kinds of support do you need to complete this program?

Is there any information about you that the program directors should know in order to assist you in successfully completing this program, i.e.: health conditions, access issues, learning disabilities, etc. ____ yes ____ no

Please describe, or, if you prefer, you may discuss this further during your interview.

Were you ever convicted of a felony or a misdemeanor (other than a minor traffic violation)? ____ yes ____ no

If yes, describe. A conviction of a crime will not automatically preclude participation.

References (work or professional)

Name	Occupation	Phone Number

The information above is true and accurate to the best of my knowledge. I understand that any falsification or misrepresentation of the information I have provided in this application will result in my ineligibility to participate in the Lay Ministry Formation Program. I submit this application for the Lay Ministry Formation Program, and I understand that this information will be used only by the Archdiocese of Indianapolis for consideration of my acceptance into the program and subsequent participation in the program. I further authorize the Archdiocese of Indianapolis to verify any information I have provided in this application. This information may include present and former employers, education and training institutions, criminal courts, state and county repositories of criminal records. I also authorize my present employer and any previous employers, present or previous fellow employees, educational and training institutions, and any other persons to furnish any information concerning my personal character, habits or employment records and hereby release all such persons from any liability for furnishing such information. I understand that this application will be kept in a confidential file in the Office of Human Resources.

Signature _____

Date _____

Please attach a letter of support from your pastor or parish life coordinator or secretariat head which includes a statement that the parish or institution will provide financial support as well as the necessary release time you will need for this program. Following an interview, you will be notified of the status of your application.

Send your completed application form to:

Matt Faley
Director, Pastoral Ministries
Archdiocese of Indianapolis
1400 N. Meridian St.
Indianapolis, IN 46202
mfaley@archindy.org