

Roman Catholic Diocese of Saskatoon
CATHOLIC PASTORAL CENTRE

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OFFICE OF LAY FORMATION
Email: layform@saskatoorcdioocese.com

APPLICATION FORM

Name _____

Address _____

_____ Postal Code _____

Phone: home _____ work _____

Email: _____

Occupation _____ Age _____

Marital Status _____ Name of Spouse _____

Number of children _____ At home _____ Independent _____

Parish _____ Pastor _____

In case of emergency contact: Name: _____ Phone: _____

Educational Background: Please check

_____ Elementary _____ High School

_____ University _____ Technical

_____ Other - Please specify

Religious studies: Please list some of the classes/workshops/conferences you have participated in:

Specific interests or gifts:

Are you:

_____ Musical instrument

_____ introverted

_____ Vocal

_____ extraverted

_____ Art

_____ don't know

_____ Other: Please specify

Please list all Church-related activities in which you have been engaged:

Please name one or two spiritual goals that you hope to achieve through your participation in this Formation Program.

Write about the importance of God and faith in your life. *If you find it difficult to express yourself in writing, be prepared to speak about this in the interview.*
