

REQUEST FOR LEVEL II CERTIFICATION

I hereby request that Catechist Certification be granted to:

_____ as Level II Catechist.
(Name of Catechist)

I verify that all requirements have been successfully completed and are on record at:

_____ in _____
(Parish/School) (City of Parish/School)

I am confident that this catechist will endeavor to give witness to his/her own Catholic faith, to faithfully uphold the teachings of the Catholic Church, and to effectively pass on the faith.

Signed _____ Date _____

Title _____ Renewal due in _____
(Valid for 3 Years)

Please photocopy these forms as needed. After completing, mail or fax to the Director of Religious Education at the Diocese of Rockford.

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