

DIOCESE OF GAYLORD † OFFICE OF CATHOLIC SCHOOLS

CATECHETICAL FORMATION

School Minister Catechetical Formation Annual Plan

School Year: August, ____ - June 30, ____

A minimum of 15 hours is required, with 6 hours being a retreat (or two 3 hour retreats)

School: _____ City: _____

Pastoral Delegate/Pastor: _____

RETREAT(s) [One 6-hour retreat or two 3-hour retreats]

1. Date _____ Location _____

Hours _____ Topic _____

Mass will be celebrated

Reconciliation will be offered

2. Date _____ Location _____

Hours _____ Topic _____

Mass will be celebrated

Reconciliation will be offered

FORMATION

1. Topic: _____

a. Instructor _____

b. Resource _____

c. Scheduled Dates _____

d. Number of Hours _____

2. Topic: _____

a. Instructor _____

b. Resource _____

c. Scheduled Dates _____

d. Number of Hours _____

3. Topic: _____

a. Instructor _____

b. Resource _____

c. Scheduled Dates _____

d. Number of Hours _____

If more space is needed attach an additional page.

Pastor/Pastoral Delegate Signature _____ **Date** _____

Return completed form to Office of Catholic Schools cjacobs@dioceseofgaylord.org by October 1st