



REQUEST FOR: ADVANCED LEVEL CERTIFICATION

This is to verify that _____
(Please print or type the name)

from the parish of _____
Name City

has completed (24) hours of formation in the areas specified by the *ADVANCED LEVEL*

curriculum. Attached is a copy of the catechist record.

Certificate is needed by ____ April 1st or ____ August 1st

Signature of Catechetical Leader

Date

**To Be Submitted To:
Religious Education Office
101 W. Airport Rd
Romeoville, IL 60446**

ATTENTION: CATECHIST CERTIFICATION

For Office Use:

Date Approved

Catechetical Associate