



JOLIET DIOCESAN PASTORAL COUNCIL APPLICATION

PLEASE PRINT/TYPE CLEARLY

Name: _____ Parish: _____

Home Address: _____

Primary Phone: (_____) _____ Other Phone: (_____) _____

E-Mail: _____

Date of Birth: _____ Married? Y / N Spouse's name: _____

Please describe your education / work experience:

Please describe your involvement in your parish or otherwise within the Catholic Church:

What expertise or special skills would you bring to the Diocesan Pastoral Council?

APPLICANT SIGNATURE:

I hereby submit my name for consideration as a member of the Diocese of Joliet Diocesan Pastoral Council for the term beginning September 1, 2018 to August 31, 2021.

Pastor Recommendation

(not required, but recommended):

The above applicant is a member of our parish; I hereby recommend his/her membership on the Diocesan Pastoral Council.

APPLICANT

PASTOR

Applications accepted (A) by fax at (815) 722-6632; (B) by e-mail at officeofthebishop@dioceseofjoliet.org; or (C) by mail to Office of the Bishop, 16555 Weber Road, Crest Hill, Illinois 60403.