



SJN Catholic Parish Religious Education Office

2024-2025 CCD Volunteer Application

Volunteer Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Cell No.: _____ Email _____

Month/Day of Birth: _____ T-Shirt Size: _____

Emergency Contact Information

Name: _____
Last First M.I.

Relationship: _____

Cell No.: _____

I would Like to Volunteer as a

Catechist/Teacher

YES NO

Catechist Aide/Teacher Aide

YES NO

Substitute Catechist/Substitute Teacher

YES NO

Session Preferred

- Tuesday 4 PM – 4:55 PM
- Tuesday Evenings 7 PM – 8:15 PM
- Sundays 10:10 AM – 10:55 AM

Comments:

