

2017
Diocesan Youth Council
Reference

This form is available online at <http://www.pocatechesis.org/diocesan-youth-council-reference>

Name of Applicant: _____

Name of Reference: _____

Position: _____ E-Mail Address: _____

Phone Number: _____ Relationship to Applicant: _____

How long have you known the applicant? Less than 1 year
 1-3 years
 3-5 years
 5-10 years
 More than 10 years

1. What qualities does the applicant have that would make them an ideal candidate for the Diocesan Youth Council?

2. How does this person handle responsibilities?

3. If this applicant someone you would identify as the best to represent the youth of his / her parish, deanery, diocese by serving on the Diocesan Youth Council? Please, explain.

Additional Comments:

I will support this applicant in his / her ministry with the Diocesan Youth Council.

Yes No

Signature

Please complete this form and return it to Pastoral Office for Catechesis, Attn: Diocesan Youth Council, 2300 S. 9th St. Lafayette, IN 47909. It should be postmarked by **March 17, 2016**.