



Archdiocese of Miami
Catechist Renewal Certification
Reflection Form

Name (contract name if an employee of ADOM): _____

Name of Parish/School: _____

E-mail Address: _____ Date of Event: _____

Speaker(s): _____

Name of Event: _____

Location: _____ Duration (hours/days): _____

For each of the following four questions, please answer in a **thoughtful and edifying manner** and in 50 – 200 of your own words.

1) What was the main objective of the event and of each presentation?

2) Explain how each presentation has enriched your living of the Catholic faith? What are three ways that you will apply what you have learned within the educational ministry in which you serve?

3) How can you associate what you have learned from each of the presentations to what the Church teaches (authentic magisterium)? (Please cite the reference of the teaching).

4) What resources were provided and how will you use them for your own continuous faith formation and in the educational ministry in which you serve?

Please either return this form to the renewal booth at the conference or send it via email within one week, or mail it to:

ARCHDIOCESE OF MIAMI – OFFICE OF CATECHESIS
9401 Biscayne Blvd.
Miami Shores, FL 33138

FOR MORE INFORMATION PLEASE CONTACT US AT 305.762.1090

| OFFICE OF CATECHESIS USE ONLY | | |
|--|--------------|-----------------|
| <input type="checkbox"/> Approved Session | Other: _____ | |
| <input type="checkbox"/> Approved Master Catechist | | |
| <input type="checkbox"/> Certificate of Attendance | | |
| <input type="checkbox"/> COMPLETED: | Date: _____ | Initials: _____ |
| <input type="checkbox"/> POSTED: | Date: _____ | Initials: _____ |
| _____ | _____ | ____/____/____ |
| Evaluator's Name | Signature | Date |