

Haiti Ministry Commission
Catholic Diocese of Richmond

APPLICATION FOR MEMBERSHIP

This application form requests information about your background, experience, and reasons for wanting to join the Diocesan Haiti Ministry Commission (HMC). Please complete the form and answer the questions on the reverse side as fully as possible. Then return the completed form and your responses to the Office of Justice & Peace as soon as possible.

A Nominations Subcommittee reviews all applications for membership. Members of this subcommittee will contact all applicants to answer their questions and will also call references to ensure that each prospective committee member has the basic skills needed to effectively contribute to the work of the HMC.

Name: _____

Address: _____

City/Town: _____ Zip: _____

Home Phone: _____ Work Phone: _____

E-Mail Address: _____

*Age: _____ *Ethnic/Racial Identify: _____

Parish: _____ City/Town: _____

Employment: _____

* The HMC strives to be as balanced and inclusive as possible in its membership, reflecting the diversity of people who make up this diocese.

(over)

**Please answer the following questions
(either in the spaces provided below or on a separate sheet of paper):**

1. Please describe your experience with Haiti Ministry.
2. What gifts would you bring to the HMC and how would you envision using them?
3. Tell us the reasons you would like to be on the HMC?
4. What are your current volunteer commitments to your local parish, community and diocese?
6. Please list the names and telephone numbers of two references (eg, pastor, co-worker, fellow volunteer, and/or friend).
7. Please describe your educational background and work experiences.