

**TOGETHER: A Collaborative for Theological Education, Formation, and Community**  
**APPLICATION**



Full Name \_\_\_\_\_

Mailing Address (Street, City, State, Postal Code) \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth (City & Country) \_\_\_\_\_  
(month) (date) (year)

Name of Religious Congregation/Province \_\_\_\_\_ Initials \_\_\_\_\_

Location of Mother/Provincial House \_\_\_\_\_ Date of First Profession \_\_\_\_\_

Are you a U.S. Citizen (Yes or No) \_\_\_\_\_ If not, country of citizenship \_\_\_\_\_

Primary Language \_\_\_\_\_ Secondary Language \_\_\_\_\_

Date of *Completion* of a U.S. Bachelor's Degree (or Equivalent) \_\_\_\_\_

Bachelor's Degree Institution & Location \_\_\_\_\_

List any other professional credentials (e.g., Spiritual Direction Certificate) \_\_\_\_\_

Catholic Theological Union Programs (CTU) of Interest \_\_\_\_\_

*Applying to CTU is a separate process from this application. More information about CTU's application and financial aid processes can be accessed at [www.ctu.edu](http://www.ctu.edu).*

*The **Together** application deadline is **June 1, 2020**.*

Person in the U.S. to be notified in emergencies \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Alternate Emergency Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Return application materials to:

**Karina Conrad, CDP**  
**Religious Formation Conference**  
**5401 S. Cornell Ave, Suite 304**  
**Chicago, IL 60615**  
**Email: [kconrad@relforcon.org](mailto:kconrad@relforcon.org) (emailed attachments)**

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*Please respond to the following. If needed, please attach an additional sheet.*

Briefly describe your current and past professional and ministerial experience.

Why are you applying and what attracts you to this opportunity?

What do you hope to contribute to your congregation and the broader church after completion of this program?

What do you hope to contribute to and gain from living in the *Together* community?

Briefly describe your formation journey and goals moving forward.

Any other information/comments you wish to share.

*In addition to this application, applicants are required to **submit two (2) recommendation forms**. One form is to be submitted by the applicant's formation director. The other is to be submitted from someone in the community's elected leadership. Please use recommendation forms provided for use by formators and leadership.*