

## CYFM Ambassador Program Application Form

Last Name	First Name	Middle				
Home Address:						
Home Phone Number: ( )	Cell Phone Number: ( )					
E-mail Address: communication: cell _ email _ social	what is your media	r preferred method of				
Date of Birth: Ag	ge: Male	Female				
School	Year of C	Graduation:				
Parish	(Name and city)					
Social Media handles (names)(Facebook, Twitter, Instagram)  Parents' Names						
Parents' email addresses						
Parents' cell phone #						
MINISTERIAL SKILLS  Working in youth ministry involves attributes CYFM feels are valuable. Based of 1-5 (5 being the strongest). Please note: A substantial experience with that particular	on your own experience, pleas A rating of 4 or 5 should indica	e rate yourself. Use a scale				
general knowledge of Catholic faith ability to teach the Catholic faith	leading prayer s leading prayer (					
leading small group discussions	communicating	with teens				
large group presentations	communicating	-				
sharing personal witness stories	•	_flexibility				
writing educational talks	-	self-reflection/ open to growth				
listening to others' stories		ability to think on your feet				
leading singing/ dancing		self-motivation				
behind the scenes retreat support	planning retreat	S				
creating retreats	sense of humor	44				
evaluating events/ retreats	room/ environm	ent set up				
leading icebreakers	event planning					
leading/participating in silly games						

	/ <b>.</b> .				
Parish Involvement	(volunteer	nacitianc/activities	and 9	annrovimate	hours ner week•
	( voiuniteer	positions, activities,	, ana c	иррі Олішаіс.	nours per week.

- •
- \_
- •
- •

Extracurricular Activities (sports, clubs, etc.) and approximate hours per week

- •
- •
- •
- Ī

## Please attach the following with this application:

- 1.) CYFM retreats and service programs you have attended, with years
- 2.) 1 page cover letter describing why you want to become a CYFM Ambassador

Please answer the following questions briefly in <u>short-answer</u> form. Please type your answers on a separate sheet of paper.

- 1. What are the strengths and weaknesses of CYFM in your eyes?
- 2. How do you live out your Catholic faith in school? Home? Personal life?
- 3. What is your biggest strength and weakness?
- 4. How would you try to get somebody who has never been to CYFM before to attend a CYFM event?

If you have any questions please email Dan: dan@cyfm.org or call: (845) 424-3609 x 230