CATEC	HIST RECORD	OF FORMATION
Catechist Name		
Workshop Title:		
Presenter(s):		

Total Formation Hours: _____

Location:

Please respond to the questions below (use both sides of the page or attach an additional sheet, if necessary). **Retain this form for your records; return a copy to your catechetical leader in order to receive credit toward your minimum required 6 hours of formation for this year.**

_____ Date: _____

1. What are the key learning points for you from this presentation?

2. How will this experience enrich your faith life?

3. How will this experience enrich your catechetical ministry?