

**DIOCESE OF JOLIET  
CATHOLIC EDUCATION FOUNDATION  
LEADERS FOR THE FUTURE  
APPLICATION FORM  
2<sup>nd</sup> & 3<sup>rd</sup> Year Applicants Only  
(Please type)**

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Home Parish \_\_\_\_\_ City \_\_\_\_\_

Employer \_\_\_\_\_ Employment Start Date \_\_\_\_\_

Position \_\_\_\_\_ # of years in position \_\_\_\_\_

Check one: Full time \_\_\_\_\_ Part-time \_\_\_\_\_ If part-time, # of hours per week \_\_\_\_\_  
Volunteer \_\_\_\_\_

Name of immediate supervisor \_\_\_\_\_

Identify the graduate program that you are studying \_\_\_\_\_

Identify the school you are attending \_\_\_\_\_

Address \_\_\_\_\_ Expected graduation date \_\_\_\_\_

**Please complete the following questions. Please be specific.**

- 1. Please list the courses taken in the past year, with a short description of the material covered.**

**2. Please describe how these courses have been a benefit to you and your current ministry.**

**3. Are you active in the practice of Catholic faith? Please describe. Identify ministries you have been involved with.**

**A formal financial need application is not required. Funds available in the program are limited. Please evaluate your personal need for funding your graduate degree: \_\_\_\_\_ absolutely necessary \_\_\_\_\_ crucial \_\_\_\_\_ very important \_\_\_\_\_ not required.**

**If awarded the grant, a check will be made out to the education institution that you will attend. The check will be mailed directly to you. Fill in the name of your institution.**

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**Your application packet must include:**

- \_\_\_\_\_ **Completed application**
- \_\_\_\_\_ **Letter of support from your supervisor**
- \_\_\_\_\_ **Letter of support from the pastor at your home parish**
- \_\_\_\_\_ **Signed copy of the loan agreement**
- \_\_\_\_\_ **Transcript of coursework to date (if not available, it must be submitted before the check will be released.)**

**Return form to:  
Catholic Education Foundation  
ATTN: LEADERS APPLICATION  
16555 Weber Road  
Crest Hill, IL 60403**

**Contact [SRoberson@dioceseofjoliet.org](mailto:SRoberson@dioceseofjoliet.org) or 815-221-6127 with questions.**