

_____ New _____ Change in weekend dates _____ Change to another leader

LEADER'S SPIRITUAL RESUME

Name: _____ (New Leader)
Address: _____ City: _____ TX Zip _____
Telephone (work): _____ (Home) _____
Cell number: (_____) _____ Email _____
Leader Training? No ___ Yes ___ Place & Date of Leader training _____
Marital Status and Family: _____
Occupation: _____
Church: Denomination: _____
Name of your church: _____
Pastor: _____ of Church where your worship participation is.
Phone # of Pastor or Church: _____
3-Day Weekend attended (i.e. Emmaus/Cursillo/Tres Deis/Via de Cristo/etc.):

Date Of weekend: _____
4th Day involvement (i.e. reunion group, P&S) Yes ___ No ___ : Where _____
Kairos participation: _____
As a Kairos volunteer do you claim or have you claimed to be legally recognized
Clergy? Yes _____ No _____

UNIT ADVISORY COUNCIL

Recommended to be Leader for # ___ at the _____ Unit or Kairos Outside
Weekend dates: _____ Year: _____ (Dates required to be registered)
Remarks:

Advisory Council Chairperson Signature _____
Address _____ City _____ zip _____ Email/Phone _____

Send email copies to below:

Email copy to: juliecole4469@gmail.com

Email copy to: stevewhatley@att.net

OR

Mail to: Julie Cole, Registrar
PO Box 10963
Midland TX 79702

