

## Our Lady of Good Counsel, Pearl City, Hawaii 1525 Waimano Home Road • Pearl City • Hawaii, 96782 Phone: 808.455.3012 • Fax: 808.456.9443 • http://www.olgcchurch.org

## PARISH PASTORAL COUNCIL APPLICATION

Name	::		DATE:				
Addre	ess:		DOB:				
Mailing Address:			_ Male	Female			
Home	Phone: _	Work Phone:	Mobile Phone: _				
E-Mail	Address	:					
<u>Requii</u>	<ul><li>paris</li><li>Qua</li><li>to lis</li></ul>	<b>lifications:</b> Working knowledge of the parish; peten to people with diverse views; desire to grow dialogue; reliability; desire to work collaborativ	ossession of time a v in spirit; openne	and energy; ability ss to prayer, study,			
Please respond to the following:							
1.	Are you on the o	willing to commit yourself to a three-year term council?	Y	ves No			
2.	Are you	willing to attend the monthly meetings?	Y	es No			
3.	Are you	willing to serve on at least one sub-committee	? \Y	′es No			
4.	Are you	willing to attend the orientation session?		/es No			
Please	e respond	to the following questions below.					
1.	What ta	lents, skills, experiences and/or training will you	bring to the Pasto	oral Council?			

<u>)</u> .	How do you view o	ur parish in regards to strengths and w	eaknesses?
3.	What are your hope	es and dreams for our parish?	
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herek qualify	by certify that I am a regiing requirements.	stered member of Our Lady of Good Counse	el, Pearl City, Hawaii, and meet all
PRINIT	NAMF:	SIGNATURE:	DATF ·