

RE Credentialing Information Cover Sheet

Name:

Address:

Phone:

E-mail:

Congregation/s or UU Organization/s Served -

Cong./Org Name: _____

Cong./Org Size: _____

Program Size - Children: ___ Youth: ___ Adults: ___

Position: _____

Since: _____

UU Affiliation -

	Cong.	Dates	Role	Comments
First:				
Next:				

Covenant Included? Check () yes () no
