NFP Teacher Certification Renewal

NFP Teacher:_____

(Arch)Diocese:_____

(Arch)Diocese NFP Coordinator:_____

(Arch)Diocesan Address: _____

NFP Method(s):_____

_____

Name of NFP Teacher Training Program(s) where the teacher received method(s) certification:

_____

_____

List the number of clients (*couples count as two*) the teacher has taught per year since USCCB Certification:

Year One_____   Year Two_____   Year Three_____

Year Four_____   Year Five_____   Total_____

See Section II of the *Standards for Diocesan NFP Ministry* available at

usccb.org/resources/2022%20Standards%20approved.pdf

Attach to this form a completed copy of a new NFP Teacher Self-Study form at

Form 5a at usccb.org/resources/5a%20NFP%20Teacher%20Self%20Study%20Form%202023.pdf.

Or

Complete the following after reviewing Section II of the *Standards*:

1. A description of how the teacher integrates Church teaching in NFP method instruction and uses an approved couple/client NFP curriculum.

2. Description of how the teacher ensures diocesan NFP program quality (see *Standards*, Section II.P).

3. Description of how the teacher respects other NFP methods and cooperates with the diocesan NFP ministry program (*e.g., schedules classes through the diocesan NFP office, takes part in NFP ministry team meetings, provides non-identifying statistics to the diocesan NFP coordinator, etc.*).

4. A list of continuing education events/activities the teacher has taken part in over the last five years (*e.g., conferences, seminars, in-services, books, subscriptions, etc.*).

5. A description of the ways the teacher has promoted NFP, chastity and fertility appreciation during the past five years (*e.g., presentations in schools, clergy education, newspaper articles, educational events for health care professionals, etc.*).

I attest that the above named teacher continues to meet the *Standards for Diocesan NFP Ministry*.

_____
(*Signature of Diocesan NFP Coordinator*)

_____
(*Date*)