



Application for Clinical Pastoral Education (ACPE)

Name _____ Social Security # _____

I wish to apply for the next:

- _____ Extended Unit (one day per week for 6 months)
- _____ Weekend Extended Unit (Sunday evenings September through May)
- _____ Summer Intensive Unit (Summer - full-time for 10 weeks)
- _____ Resident Year (September - August ~ four units per year)

**Mailing
Address**

Present Street Address (if different than above) _____

Permanent Address (if different than above) _____

E-mail Address _____

Telephone#(s) _____

Denomination/Faith Group Affiliation _____

Association, Conference, Diocese, Presbytery, Synod _____

Present Position _____

Ordained? ___ Yes ___ No

Education:

College _____ Degree: _____

Seminary _____ Degree: _____

Graduate _____ Degree: _____

Previous Clinical Pastoral Education:

Dates

Center

Supervisor

References and Addresses:

Denomination/Faith Group _____ Telephone _____

Academic Address _____ Telephone _____

Other Address _____ Telephone _____

Please provide the following:

1. A reasonably full account of your life, including important events, relations, people who have been significant to you, and the impact these events and relationships have had on your development. Describe your family of origin, current family relationships and your educational growth dynamics.
2. A description of the development of your religious life, including events and relationships that affected your faith and currently inform your belief systems.
3. A description of the development of your work (vocation) history, including a chronological list of positions and dates.
4. An account of an incident in which you were called to help someone, including the nature of the request, your assessment of the Aproblem,≡ what you did, and a summary evaluation. If you have had previous CPE, include this information in verbatim form.
5. Your impression of Clinical Pastoral Education and your educational goals, including how this training will be used to meet your goals for doing ministry.
6. An application fee of \$70 is required by this center at the time of application. The charge for one unit of CPE is \$500. This includes only the application fee and tuition for the unit.
7. Admissions Interview: If you are not being interviewed at the center to which you are applying, you will need to obtain an admissions interview summary prepared by an ACPE supervisor or another person satisfactory to the center to which you are applying. If the written summary is not yet available, please indicate the following:

Admission Interview Conducted by: _____

Address Including Zip Code: _____

Telephone: _____ Date Interview Conducted: _____

IF YOU HAVE HAD PREVIOUS CPE, PLEASE PROVIDE THE FOLLOWING:

8. Provide copies of previous CPE evaluations written by you and your supervisor.
9. What are your personal and professional goals and how will continued training aid that process?