Supervised Practice of Ministry Internship APPLICATION

Queen's College Faculty of Theology and

Pastoral Care Department, Eastern/Western Health

NAME					APPLICATION DATE	
ADDRESS				POSTAL CODE		
PHONE (Home) (Work)			FAX			E-MAIL
PERMANENT ADDRES	S (if different	from abo	ove)		L	
DATE OF BIRTH M			MARITAL STATUS			S.I.N.
DENOMINATION/FAITH GROUP			ORDAINED □ NO □ YES - DATE			
PRESENT POSITION						
EDUCATIONAL HISTO	RY (post seco	ondary)				
Dates	INST	N	DEGRE		REE/DIPLOMA/CERTIFICATE	
(start – finish)	(name)					
	PREVIOUS 1	PASTOI	RAL TRA	INI	NG EX	PERIENCE
TRAINING CENTRE						
ADDRESS						
SUPERVISOR/COORDINATOR						DATE

Please include the following with your application: (Use separate sheets)

- 1. Develop an in-depth autobiographical sketch of your "life journey". In your paper (two-three pages) describe how you have integrated significant events into your life as they relate to your a) psychological. b) social, c) educational and d) spiritual development. This will serve as the basis for your initial placement meeting
- 2. What are your reasons for seeking pastoral training at this time?
- 4. Have you ever experienced the benefits of Spiritual Direction? Pastoral counseling? If so, please describe.
- 6. Have you had any previous experiences in a pastoral setting? (Eg. A member of a bereavement team)
- 7. Please add any other relevant information not covered.
- 8. Enclosed are two letters of reference for you to give to persons who know you. Please choose persons who can provide a reference in two of the following areas: academic, spiritual and/or pastoral, personal or professional.

Note: You must complete and submit an application to Queen's College if you have not previously been a student at Queen's College, St. John's, NL. **Application deadline:**

PLEASE SEND APPLICATION TO:

Supervised Practice of Ministry Queen's College Faculty of Theology 210 Prince Philip Drive, Suite 3000 St. John's, NL A1B 3R6

E-mail: queens@mun.ca

LETTER OF REFERENCE AND RECOMMENDATION FOR SPM APPLICANTS

NAME OF APPLICANT:
ADDRESS:
TELEPHONE:
DATE OF PROGRAM:
RETURN TO: Supervised Practice of Ministry Queen's College Faculty of Theology 210 Prince Philip Drive, St. John's NL A1B 3R6
NAME OF REFERENCE GIVER:
ADDRESS:
TELEPHONE:
POSITION/FI INCTION:

Please do not return this letter to the candidate, but send it directly to the address on the left. *Please mark CONFIDENTIAL*. Thanks for your prompt attention to this matter.

Supervised Practice of Ministry is an internship developed and offered by Queen's College Faculty of Theology in partnership with the Pastoral Care Department, Eastern Health. This Internship is designed to provide a learning experience with a blend and balance of

- > Theory and Practice
- Personal Awareness and Clinical Skills
- > Individual Spiritual Direction and Group Process
- > Theological Reflection and Engagement in Complex Team Networks.

In light of the above description of the SPM program, in your reference letter please address any elements of this program in which you have has experience with the applicant. Are there any areas in particular that might benefit the applicant?

PLEASE FORWARD REFERENCE TO:

Supervised Practice of Ministry Queen's College Faculty of Theology 210 Prince Philip Drive, St. John's, NL *A1B 3R6*