

APPLICATION FOR CONGREGATION-BASED CLINICAL PASTORAL EDUCATION
THE SAMARITAN PASTORAL COUNSELING CENTER, North Tonawanda, NY
Accredited as a CPE Satellite of Sisters of Charity Hospital, Buffalo, NY
Accredited by the Association for Clinical Pastoral Education (ACPE)

RETURN TO: The Rev. Robert C. Spilman

363 Darwin Drive
Amherst, NY 14226

Tel. (716) 839-4316 Cell. (716) 479-7933

E-mail: rcspilman@roadrunner.com

1. Name _____

2. Address _____

Telephone (____) _____ Cell (____) _____

E-Mail _____

3. Present Congregation _____

Address _____

Telephone (____) _____ E-mail _____

4. Date of Birth _____

5. Education:

College _____ Dates _____ Major _____

Seminary _____ Dates _____ Major _____

Ordained (Date) _____

6. Denomination _____ Length of Pastoral Experience _____

ATTACH THE FOLLOWING ITEMS TO THIS APPLICATION:

1. A reasonably full account of your life including important events and relationships with persons, especially family of origin, describing the shaping of your identity in the family.
2. A discussion of the development of your spiritual life including faith experiences, your participation in the life of the church, and your decision to enter the ministry.
3. Describe how any significant challenge or loss in your life has impacted your awareness of self or others. Include an assessment of your current health and wellbeing.
4. State what you hope to learn in Congregation-Based CPE including your impression of and expectation for Clinical Pastoral Education.
5. List previous CPE experience, if any, and provide copies of evaluations, if available.
6. Application fee of \$40 payable to: "Samaritan Pastoral Counseling Center" or "SPCC."

Signature of Applicant _____

Date _____

CPE unit applied for: (1) Aug.—Nov. (Jamestown) _____ (2) Oct.—Feb. (Buffalo) _____
(3) March—June (Rochester) _____