

ACPE APPLICATION FOR CLINICAL PASTORAL EDUCATION

MAIL APPLICATIONS FOR ALL PROGRAMS TO THIS ADDRESS:

WellSpan Health - SPIRITUAL CARE AND EDUCATION

1001 S. George Street, P.O. Box 15198, York, PA 17405

APPLICATION FOR: Summer Extended Residency (only at York) Supervisory

Location Preference for Summer/Extended: York Hospital Gettysburg Hospital No Preference

All Information Must Be Completed and Included – INTERNATIONAL APPLICANTS SEE QUESTION #8 ON 2ND PAGE

Name _____

Mailing Address _____

Country & Zip Code _____ Telephone () _____ E-mail _____

Permanent Address _____

_____ Country & Zip Code _____ Telephone () _____

Denomination/Faith Group Affiliation _____

Jurisdiction/District/Diocese/Conference/Association _____

Ordained/Licensed/Appointed _____

Present Position _____

College: Degree/Date _____

Seminary: Degree/Date _____

Grad School/Other: Degree/Date _____

PREVIOUS CLINICAL PASTORAL EDUCATION:

<u>Dates</u>	<u>Center</u>	<u>Supervisor</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

REFERENCES AND ADDRESSES:

Denomination/Faith Group –Name/Title: _____

_____ Telephone(_____) _____ e-mail: _____

Academic –Name/Title: _____

_____ Telephone(_____) _____ e-mail: _____

Personal-
Name/relationship _____

_____ Telephone(_____) _____ e-mail: _____

Signature of Applicant: _____ **Date:** _____

Application & Instructions for Clinical Pastoral Education

Please type your responses to the following items. See page limits.

1. **Please complete the attached form and mail to WellSpan Health, Spiritual Care and Education, 1001 S. George Street, P.O. Box 15198, York, PA 17405.** Read instructions carefully before submission. International applicants have additional requirements and deadlines.
2. An account of your life – Describe your family of origin, current family relationships and significant social relationships and their impact on your ministry. Include significant persons and events (e.g. marriages, divorces, children, deaths, etc.) as they have impacted your growth and development. (Two pages)
3. A description of your spiritual growth and development - Describe the events and process that led you toward religious leadership. Indicate your current relationship with your faith tradition/group. (Two pages)
4. A description of your work (vocational) history - Include a chronological list of jobs/positions dates of employment and a brief statement of your current employment and work relationships. A resume is satisfactory. (Two pages)
5. A recent account of when you helped someone and what you learned from this spiritual/religious/pastoral encounter. (Four pages)
 - a. Include the nature of the request, your assessment of the issue/encounter and a brief evaluative summary of what you did and how you helped.
 - b. *If you had prior Clinical Pastoral Education*, please use verbatim format and indicate the most significant learning in your previous training.
6. A. Your impressions of Clinical Pastoral Education. (One page)
 1. Indicate your expectations of Clinical Pastoral Education.
 2. If Clinical Pastoral Education is being required of you, how do you understand the requirement?
 3. Tell us your personal strengths and weaknesses in meeting/encountering peopleB. List two learning goals for this program and how CPE training will help you address them. (One page)
 1. Indicate any professional goals and how Clinical Pastoral Education will address them.
 2. Give a brief understanding of how you take responsibility for your learning.
7. You are required to complete an admissions interview with an ACPE Supervisor or a person approved by the Center. Check the ACPE website, www.acpe.edu for center listings. For summer applicants, we accept a written admissions interview, however, a face-to-face suitability meeting is expected in order to help explain the differences of our two sites – Gettysburg and York Hospitals. **For residency, an on-site interview is a required.**
8. **International Applicants:** WellSpan requires an application submitted **September 1** of the year **prior** to entry. You will have to obtain appropriate documentation from U.S. Immigration, which requires a visa and a US Social Security number. This documentation should be approved at least 6 months prior to the program. See: Students on the ACPE website: <http://s531162813.onlinehome.us/students/international-students.html> for complete information.

If offered employment, can you submit verification of your legal right to work in the U.S.? Yes ____ No ____
9. **Applicants with previous CPE should attach copies of all previous self and supervisor evaluations.**

I hereby give my consent to WellSpan Health, Spiritual Care and Education to access my CPE evaluations and previous CPE supervisors about matters pertaining to this current application.

Signature: _____ Date: _____