

**Federation of Christian Ministries
Application for Civilian and Military Settings and Professional Association
Religious Body Endorsement**



Committee for Specialized Ministries
2532 Athens Road, Olympia Fields, IL 60461
Telephone: 708-285-5845; Fax: 708-684-4445
Email: specmin@FCMmail.org

Date _____

Please type or print clearly

Personal Information

Name of Applicant: _____

In each category below, check those boxes that apply and provide information

- I am seeking endorsement for certification by a professional organization.
- I am seeking approval to participate in a professional organization as a student in training.

Name of organization for which you are seeking endorsement/approval:

- American Association of Pastoral Counselors; level: _____
- American Protestant Correctional Chaplains Association; level: _____
- Association for Clinical Pastoral Education; level: _____
- Association of Professional Chaplains; level: _____
- College of Pastoral Supervision and Psychotherapy (CPSP) _____
- National Institute of Business and Industrial Chaplains (NIBIC) _____
- Other _____

Applying for endorsement to serve in one of the following settings:

Correctional Institution _____ Air Force, Active Duty _____ Reserve _____

General Hospital _____ Air National Guard _____

Mental Health _____ Army, Active Duty _____ Reserve _____

Pastoral Counseling _____ Army National Guard _____

Hospice _____ Navy, Active Duty _____ Reserve _____

Veterans Affairs _____

Work Place _____

Other Setting (specify) _____

1. When will you be available for appointment to this setting? _____

2. Name _____ Social Security No. _____

3. Address _____

City _____ State _____ Zip Code _____

4. Telephone: Home _____ Office _____

Fax _____ E-mail _____

5.Date of Birth _____ Age _____ Ethic Origin _____

6.Marital Status: Single ___ Married ___ Widowed ___ Separated ___ Divorced ___

7.Name of Spouse _____

8.Names of Children and dates of birth:

9.Education:

College _____ Degree _____ Year _____

Seminary _____ Degree _____ Year _____

Postgraduate _____ Degree _____ Year _____

Postgraduate _____ Degree _____ Year _____

10.Date of initial membership in the Federation of Christian Ministries _____

11.Date of FCM Ministerial Certification/Commissioning _____

12.Date of the most recent FCM Ministerial Certification/Commissioning Renewal

_____ FCM Region _____

13.Professional ministerial positions (in chronological order, beginning with present; indicate whether part time or full time, with dates). Use an extra sheet of paper if space is insufficient.

14.List your hobbies, sports and recreational interests:

15.List your service in civic and community organizations:

16.What is the status of your application for employment?

17.If already filling the position for which you seek endorsement, indicate date such service began:

18.List professional organizations of which you are a member that pertain specially to professional competence:

19. Give details of training relevant to positions for which you are seeking Endorsement (CPE, etc.):

20. Give full name, title and complete mailing address of references as follows:

a) Your FCM regional Vice-President:

b) Your FCM Ministerial Certification Peer:

c) Two (2) other persons familiar with your ministry:

21. College and seminary transcripts supporting the graduate level of theological education or its equivalent required by the certifying organization to be sent directly to the FCM Committee on Specialized Ministries from Registrar.

22. A succinct life history which identifies and illustrates the ways in which the events and relationships of your life have served as preparation and motivation for your seeking to minister in this specialized setting. This should be a minimum of three (3) pages. This can be updated from your CPE Life History statement

23. A paper describing your faith journey. This can be updated from your CPE Faith Journey statement

24. A statement of your understanding of ministry especially as it pertains to ministry in the setting for which you are seeking endorsement. This should be a minimum of one (1) page.

25. A paper describing your understanding of being a representative of the Federation of Christian Ministries in this ministry setting.

26. CPE evaluations are not required, but are extremely helpful to the interview and endorsement recommendation processes of the Specialized Ministries Committee.

27. Have you applied previously for Endorsement? _____ Date _____

28. Were you granted Endorsement? _____ Setting _____

Other Ordination or Ministerial Licensure Status

- I was ordained/licensed a minister/priest in the _____ denomination by _____ on _____ at _____
- My Ministerial standing is currently held in the: _____ denomination/community of faith.

Current Employment

I am employed by: _____

Address of Employer: _____

Title: _____ Length of Employment: _____

Current Occupation if other than employment

My current occupation is: _____

Setting: _____

Duration: _____

Describe your current faith community involvement

Member of: _____

Location: _____

I am involved in the following ways:

List your faith community ministerial experience (three most recent settings):

Name of Community Location Position Years

Name of Community	Location	Position	Years

List your Clinical Pastoral Education experience (last three locations)

Training Center State Year Unit Level(s) Supervisor

Training Center	State	Year	Unit Level(s)	Supervisor

List your supervised pastoral counseling hours (last three centers)

Training Center State Year Total Hours Supervisor

Training Center	State	Year	Total Hours	Supervisor

The following is a list of documentation you must provide along with this form to complete your application for religious body endorsement or approval.

- Verification of current FCM membership
- Verification of current participation in an FCM ministerial peer relationship
- If holding FCM Ministerial Certification/Commissioning verification of current standing
- A current signed Statement of Consent/Background Disclosure Form
- A professional (work) resume
- Verification by your supervisor/manager of your practice of ministry and ability to meet the requirements of the certifying body (Note: this can also serve as one of your letters of recommendation)
- Verification of three years experience in the practice of ministry
- At least four letters of recommendation including one from your FCM Ministerial Peer and one from your FCM Regional Vice President
- A succinct life history
- A paper describing your faith journey
- A summary paper addressing your interest in and understanding of the specific specialized ministry for which you are applying for endorsement/approval
- A summary paper addressing your understanding of being a representative of the Federation of Christian Ministries in this ministry setting.
- Verification of educational attainments required by the certifying organization, including:
 - Bachelor's degree
 - Master of Divinity degree/equivalent
 - Any additional degrees or continuing education unit
 - Verification of one quarter of clinical pastoral education (CPE) or its equivalent
- A recent photo is helpful
- A non-refundable Application Fee of \$90.00 payable to The Federation of Christian Ministries must be enclosed for the process to go forward.

Consent for Release of Confidential Information

I consent to the exchange of information and documents among any and all persons, institutions, individuals, licensing agencies, and federal and state governmental bodies with whom I have been associated or have information that are material to evaluating and monitoring my professional practices, qualification, competence, morality and ethics. I understand that the Federation of Christian Ministries will rely upon the information given in this application form and obtained by its several inquiries noted above to grant me a religious body endorsement for a specialized ministry. I also agree to inform the Federation of any changes or modifications to the information provided herein, so that at all times the Federation will have accurate and current information.

Date _____

Print Name _____

Signature _____

Declaration

I declare that the information contained in this application and in the documents I submit as part of my application for religious body endorsement/approval is correct and factual, to the best of my knowledge. I understand that any information I submit which is intentionally false or misleading will disqualify me for endorsement/approval, or will be grounds for revocation of endorsement or approval that has been granted. I recognize the authority of the FCM Committee on Specialized Ministries to represent the Federation of Christian Ministries in this Endorsement process and its responsibility to recommend to the Circle of Directors of the Federation of Christian Ministries the granting, denial or withdrawal of Religious Body Endorsement. The final decision rests with the FCM Circle of Directors.

Signature of Applicant: _____ Date: _____

Application Fee of \$90.00 is enclosed. Check # _____ Date _____

Please complete and return the original of this form, along with the other materials requested to:

Christy Howard-Steele.
2532 Athens Road
Olympia Fields, IL 60461

This application does not bind either FCM or the applicant for Endorsement. However, it is agreed that this form shall be an integral part of the contract should Endorsement be granted and will be attached to and made part of the applicant's Endorsement file. This application must be signed, dated, fully completed and accompanied by the required fee.

Retain a copy of all documents for your records.

FCM: CSM/chs/03/01/11