



APPLICATION FORM

Surname:		Title:	
First Name:			
Address:		Email address:	
Post Code:		Phone number(s):	
Details of the Christian church/community you attend or are a member of:			
Denomination:			
Indicate when and where you received training for offering spiritual direction and/or how many years of experience you have of accompanying others as a spiritual director.			
Please give details of any relevant training or support that you have received in the last 12 months.			
Please indicate the approximate number of spiritual accompaniment sessions you provided in the last 12 months.			
How often do you receive spiritual direction yourself?			
How often do you receive supervision – or how you are seeking it if it is not your current practice?			
Describe what you seek to offer a potential directee.			
Please give details of any particular additional skills offered e.g. Ignation exercises			

Please give contact details of someone who has knowledge of your ministry as a spiritual director and who is willing to act as a referee for you. Please ask for their permission in advance.

Name:

Address:

Post Code:

email address:

If you are an applicant from outside the diocese of Peterborough or from another church tradition, we require a reference from your previous Bishop or similar person (e.g. circuit supervisor, moderator etc)

Title:

Name:

Address:

Email address:

References will be taken up after the applicant has met with the spirituality adviser or other appropriate person.

Signed:

Date:

Please return this form to:

*Sr Rachel Overton
Bishop's Adviser for Spirituality.
31 Kirkwood Close
Peterborough
PE36BL*

Application forms may be submitted by email to:

sister.rachel@ymail.com