Box QQ McLean, Va. 22101

## **Application for the Pastoral Care and Counseling Seminar**

## The Center for Pastoral Counseling of Virginia 2017-2018 Term

All application materials must be on file by May 1, 2017.

Name			
Last	First	Middle	
Address			
Telephone (Office)	Home	e	
E-mail address		_Mobile	
Date of Birth			
Citizenship			
Certification (if any): AAPC N	Membership Level	AAMFT Memb	er Level
Licensure or endorsement:			
What certification/licensure are	e you working toward,	if any?	
I am applying for: (Check one The Seminar in pastora Clinical Residency in Pa	l counseling track	n CPC	
College and counseling degr	rees:		
Institution		Degree	Year awarded

Attach to this application your graduate transcript copies, credentials and eferences. Send to the Center for Pastoral Counseling of Virginia, Residency Program, c/c Rev. Catherine McCollough. Please include:		
a.	Current Vita	
b.	Letter of reference from a counseling peer or colleague	
c.	Letter of reference from a former professor, a supervisor, or person who has	
	oversight of your counseling work.	
d.	A personal reference	
e.	Transcript copy of your graduate counseling degree, if applicable.	
Also	attach to this application a clear and concise response to the following:	
a.	Briefly state your objective, motivation, and interest in applying for the Pastoral	
	Care and Counseling Seminar or the Residency Track. Include a statement of you spiritual affiliation or faith group.	
b.	In what other type of work or activity (if any) will you be engaged during your	
time	in the Program?	
c.	Your plans for using training in pastoral counseling and psychotherapy in your	
ture vocat	ion.	
	Signed Date	

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McLean, Virginia, 22101