



Chaplaincy Course 2021-22

Please return completed form to: Discipling the Nations
12A Masefield Close
Lichfield
WS14 9DD

Email: hello@dtN.academy

Telephone: 01543 411322

Title Surname

First name(s)

(Name you prefer to be known by)

Full Address

.....

.....

Post code

Email Address

Home phone

Mobile phone

Date of Birth (day} __ __ (month) __ __ (year) __ __

Nationality

If not UK, what is your immigration status?

.....

Marital status

Name of spouse (if applicable)

What level of education have you achieved?

School Certificate O Level/ GCSE A Level/ Further Ed.

Degree/ Higher Degree (type & subject)



Do you attend church regularly? Yes / No

Church

Address

Pastor

Have you any health or mobility issues? Yes / No

If yes, please give brief details

Please provide the names and contact addresses of two referees who are not family members:

.....

.....

Pastor / employer / friend / other *Employer / friend / other*

Which level are you applying for

- Attendee only (Level 2)
- Level 3
- Level 5

Please write a short paragraph – around 250 words - on each of the topics below and include them with your application. If you would prefer to submit your answers verbally please inform the church office and will arrange for you to speak to a member of the team.

- 1) Please describe your experience of being born again and baptised in the Holy Spirit.

- 2) How did you hear of the Chaplaincy course - and what led you to apply?

- 3) What are your hopes for this course, and do you have any expectations of how you may use what you will learn to minister to people after the course?