



TRAINING SPIRITUAL DIRECTORS SINCE 1982

## APPLICATION FOR ALL GROUPS AND TRAINING PROGRAMS

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

RELIGIOUS AFFILIATION/CONGREGATION: \_\_\_\_\_

CLERGY OR LAYPERSON? \_\_\_\_\_

The following questions are designed to assist the staff in getting to know you in terms of background, experience, and your expectations as they relate to our program. Your answers private, and we will not share them with anyone outside the HeartPaths leadership without your permission.

**BRIEFLY, TELL US ABOUT YOUR SPIRITUAL BACKGROUND.**

**WHAT TYPES OF SPIRITUAL DISCIPLINES DO YOU CURRENTLY PRACTICE?**

**HAVE YOU EVER BEEN IN SPIRITUAL DIRECTION?**

**ARE YOU CURRENTLY SEEING A SPIRITUAL DIRECTOR? TELL US ABOUT YOUR EXPERIENCES.**

**WHAT ARE YOU LOOKING FOR AND WHAT DO YOU HOPE TO RECEIVE FROM THIS PROGRAM?**

**HOW DO YOU EXPECT TO USE THIS TRAINING?**

**WHAT QUESTIONS DO YOU HAVE FOR US AT THIS TIME?**

Take as much space as you need to respond.

Please email a pdf of your answers to: [aidan@heartpaths.org](mailto:aidan@heartpaths.org)

If you have questions please email or call Aidan at: 405.464.8975