

**THE PRESBYTERIAN COUNCIL FOR CHAPLAINS AND MILITARY PERSONNEL**

CUMBERLAND PRESBYTERIAN CHURCH  
KOREAN PRESBYTERIAN CHURCH ABROAD

CUMBERLAND PRESBYTERIAN CHURCH IN AMERICA  
PRESBYTERIAN CHURCH (USA)

**APPLICATION FOR ECCLESIASTICAL APPROVAL FOR  
APPOINTMENT TO THE CIVIL AIR PATROL CHAPLAINCY**

---

**Biographical Information**

Your Full Name \_\_\_\_\_  
(First) (Middle) (Last) (Soc. Sec. No.)

Mailing Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Marital Status Single \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_

If ever separated or divorced attach separate statement.

Spouse's Name \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Children: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education**

College \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

Seminary \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

Graduate School \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_

**Ecclesiastical Status**

Denomination: \_\_\_\_\_

Ordained by (Presbytery): \_\_\_\_\_ Date: \_\_\_\_\_

Member of (Presbytery): \_\_\_\_\_

Name and address of Presbytery Stated Clerk \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Present Position: \_\_\_\_\_

Pastoral and other types of Ministerial Experience (give place and dates of Service )

Name of Church or Institution	City and State	Date of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Personal Data**

Have you or your spouse ever undergone treatment for mental or emotional illness? (If so , explain) \_\_\_\_\_

List your hobbies, sports and recreational interest: \_\_\_\_\_

List your service in civic and community organizations: \_\_\_\_\_

**Military or Veterans Affairs Information**

Have you served in the Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch of Service \_\_\_\_\_  
(Branch) (Dates) (Highest Rate or Rank Held)

Have you ever registered as a conscientious objector? Yes \_\_\_\_\_ No \_\_\_\_\_

**Statement of Understanding**

1. I recognize the authority of The Presbyterian Council for Chaplains and Military Personnel, representing the participating denominations, to grant, deny, or withdraw Ecclesiastical Approval.
2. I understand that the granting of Ecclesiastical Approval for the Civil Air Patrol Chaplaincy is not valid for the Armed Forces Chaplaincy.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Enclosed or attached are the following:

1. Brief life sketch (approx. 2 pages).
2. A statement of your motivations and reasons for wanting to serve in the Civil Air Patrol Chaplaincy.
3. Three letters of recommendations.
4. Current photograph

In order to facilitate this application, a type signature will be accepted to begin the process, but a hand signature page, must be mailed or scanned and sent to the PCCMP at:

**The Presbyterian Council for Chaplains**

4125 Nebraska Ave, NW  
Washington, DC 20016  
Email: chaplains@pccmp.org

Phone: 202-244-4177  
Fax: 202-237-0983