



Lifelong Learning

Certificate in Public Safety Chaplaincy Application for Admission

Last Name: First Name: M:

Street Address:

City: State: Zip code:

Mailing Address (only if different than above)

PO Box or Street Address:

City: State: Zip code:

Phone Number: Other Phone Number:

Preferred Email:

Date of Birth:

Social Security Number: Driver's License # & State:

Optional: Family Information (marital status, name of spouse, children):

Current church membership:

Denomination or affiliation:

Are you ordained? Y or N If Y, to what ministry?

Date and place of ordination:

Denomination or affiliation:

List all undergraduate, graduate, and post-graduate institutions attended beginning with the most recent.

Institution	City/State	Dates: from/ to	Degree	Major