



## The Institute for Clinical Pastoral Training.

### *Application for Clinical Pastoral Education – Standard/Evidence-Based Units*

1. Applicants for Clinical Pastoral Education
  - a. Submit a complete application. Required areas are shown with an \*. Incomplete applications will not be processed and will be returned.
  - b. Submit documentation for any CPE units to be considered for transfer.
2. Applicants for the Supervisor-in-Training (SIT) track
  - a. Additionally, submit documentation showing completion of a minimum of four (4) units of CPE (units completed under either ACCC or ICPT do not require documentation).
  - b. Submit a two (2) to three (3) page paper outlining your reasons for wanting to be considered for the SIT program.
3. All applicants
  - a. Submit the entire package electronically (preferred method) to [application@clinicalpastoraled.org](mailto:application@clinicalpastoraled.org), via fax to (407) 218-6481, or via USPS to:  
The Institute for Clinical Pastoral Education  
Office of the Registrar  
PO Box 620822  
Orlando FL 32862-0822
4. ICPT does not discriminate, in its admission decisions, against any federally protected status including, but not limited to: race, gender, religious preference, age, or sexual orientation. To comply with civil rights statutes, ICPT will collect certain demographic information. Any disclosures are voluntary and will not affect your application status.

## Application for Clinical Pastoral Education (CPE)

### I. \*Section 1 – Unit Information

I am applying for  Long Distance Unit       On Site Unit    Unit Date:

Unit Type:  Standard    Extended       Evidence-Based    SIT Track

### II. \*Section 2 – Personal Information

First Name (given)	Middle Name	Last Name (surname)	Suffix (Jr., Sr., etc.)
Street Address			
City	State	Zip Code	
E-Mail (do not use a work e-mail)			
Phone (#####)		Date of Birth (m/d/yyyy)	
Have you ever been convicted of a felony or misdemeanor? (If yes, attach a separate sheet.) <input type="checkbox"/> Yes <input type="checkbox"/> No			

### III. \*Section 3 – CPE Units to be Recognized

Date Completed (m/yy)	Unit Type	Affiliation (ACPE, CPSP, etc.)

Attach additional pages if necessary. Only units from APCC, ACPE, CPSP, and SCA qualify for automatic recognition. All others are on an exception basis. The decision of the admission board is final.

**IV. \*Section 4 – Employment**

Current Employer	City/State	Position:	Dates (m/yy): -
Previous Employer			-

**V. \*Section 5 – Scholastic**

Highest Degree Obtained

High School <input type="checkbox"/>	Associates <input type="checkbox"/>	Bachelors <input type="checkbox"/>	Masters <input type="checkbox"/>	Doctorate <input type="checkbox"/>
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Undergraduate

School	City/State	Degree	Dates Attended (m/yy)

Graduate

School	City/State	Degree	Dates Attended (m/yy)

**VI. Section 6 – Demographic Information (optional)**

Faith Group/Denomination	Are you Ordained/Licensed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, enter the year of ordination (yyyy).
Ethnicity/Race	Country of Birth	Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No

VII. **\*Section 7 – Narratives (submit on additional sheets)**

1. Where/How did you find out about ICPT CPE?
2. Please provide a reflective autobiography giving special attention to pivotal life events and relationships that have shaped you as a person.
3. Please describe a situation where you helped another person who was facing a difficult situation. Applicants with previous CPE experience will provide a case study (verbatim) to answer this narrative.
4. What is your understanding of CPE and what do you hope to gain in both personal and professional development?
5. Please provide a brief *Curriculum Vitae* that describes your education, training, and work experience.

## VIII. Section 8 – Refund Policy

### ICPT Clinical Pastoral Education Tuition Refund Policy

Name:

Date (m/d/yy):

The Institute for Clinical Pastoral Training (ICPT) has developed this refund policy to clearly identify the refund due in the event that the student cancels, withdraws, or is terminated from the program or if ICPT cancels a particular unit.

#### I. Definitions

- a. ICPT cancellation – ICPT cancels a unit prior to the start date.
- b. Student cancellation – The student does not begin the unit or submit any unit required documentation.
- c. Student withdrawal – A student is considered withdrawn if the following occurs:
  - i. On-site unit – The student will does not attend two (2) consecutive sessions or does not submit two (2) consecutive assignments without contacting the unit supervisor.
  - ii. On-line unit – The student misses two (2) consecutive scheduled supervisory sessions or does not submit two (2) consecutive assignments without contacting the unit supervisor.
- d. Student termination – ICPT terminates the student for cause.
- e. Last day of Attendance (LDA) – The last date the student submitted a required assignment, participated in a supervisory session, or participated in a forum board.
- f. Date of Determination (DOD) – The date the Tuition Refund Worksheet is prepared.

#### II. Refunds

- a. Rejection of an applicant – If an applicant is rejected for enrollment by ICPT a full refund of all monies will be paid less a maximum application fee of \$75.00
- b. Program cancellation – If ICPT cancels a unit subsequent to the student's enrollment, all monies paid will be refunded.
- c. Student withdrawal prior to the start of class or no show – If a student, accepted by ICPT withdraws prior to the start of class, all monies paid will be refunded less a maximum application fee of \$75.00.

#### III. Withdrawal or Termination after the Start Date of a Unit


Refund amounts will be based on the students LDA.

- a. First week of the unit (start date + 7 days) – The student will be refunded 90% of the tuition paid as calculated on the tuition refund worksheet. Application fees are non-refundable.

- b. Beginning of the second week through the end of the sixth week (day 8 through day 42) – The refund will be calculated using a pro rata portion of the tuition due for the unit plus 10% of the unearned tuition for an administrative fee. Application fees are non-refundable.
  - c. After the sixth week (day 43 forward) – There is no refund. The full tuition paid is retained by ICPT and the student is responsible for any unpaid portion.
  - d. Refunds will be processed via company check no later than 45 days from the DOD and sent to the address on file for the student. ICPT is not responsible for lost checks.
- IV. Tuition Refund Worksheet

See Appendix A.

**APPENDIX A**

	<b>The Institute for Clinical Pastoral Training</b> <b>Tuition Refund Worksheet</b>				
	Student Name:			Date:	
Unit Start Date					
Last Date of Attendance					
Date of Determination					
Total Tuition Due					
Total Tuition Paid as of Date of Determination					
Percentage of Tuition Paid					
Program Length (weeks)			12		
Weeks Attended			0		
Pro Rata Portion Completed			0%		
Earned Tuition			\$0.00		
Administrative Fee (10% of unearned tuition)			\$0.00		
Owed to Institution					
Student Payment					





- ii. You have the right to cancel this contract if you are no longer physically able to complete the unit(s). You may cancel verbally or in writing.
  - iii. In the event of cancellation under this provision, the stipulations of the Tuition Refund Policy will be followed.
5. General Conduct
- a. Confidentiality is basic to professionalism. Any communication regarding patients outside our professional treatment and/or training circles is prohibited except as required for the safety of patients, families, or others or under subpoena from a recognized law enforcement agency.
  - b. The material submitted to your assigned supervisor concerning you and your ministry as a chaplain trainee may be used in the learning process of a supervisor-in-training and/or discussion among supervisors with the understanding that these persons are part of the professional training circle. Your materials may also be used by your assigned supervisor with other ICPT Supervisors and other professionals from whom he/she may seek consultation as part of his/her professional development or as part of research intended to contribute to the field of clinical pastoral education and/or clinical pastoral care. Any use of your materials beyond this institution's professional training circle is prohibited unless required by law.
  - c. In all of your activities during your training, you agree to function professionally and within the Ethical Code of Conduct as contained in the CPE Student Handbook. A copy of the handbook is provided to you in your acceptance packet for this program.
  - d. You will be performing clinical hours at a location to be agreed upon by your supervisor. You agree to abide with all the policies and procedures of that site.
  - e. You agree to the video or audio recording of my individual or group sessions. These recordings will be used for educational purposes only and will not be available to others without my consent. I understand I may request termination of recording at any time.
6. Employment Guaranty and Placement
- a. You agree that ICPT does not provide placement assistance. You agree that obtaining CPE through ICPT does not guarantee a vocational chaplaincy position. CPE is simply a requirement for employment for most institutions. Each institution sets its own requirements for employment and applicants must meet those requirements in order to be considered for a position.
7. Agreements and Signatures
- a. I have read and understand the student manual and agree to the requirements within.
  - b. I have been provided with and read the current school catalogue.
  - c. This document and any attachments constitute a legal and binding contract once completed and signed.
  - d. I have read, understand, and agree with this entire document (including attachments).
  - e. I affirm, by my signature, that all representations in this document are true and complete to the best of my knowledge. I understand that false statements will result in disciplinary action.

You may sign this document either electronically by typing your full name in the space below, or with pen and ink as indicated.

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Student Signature (electronic or standard)

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Date (m/d/yyyy)