

**Ahoskie Police Department  
Volunteer Chaplain Application**

**PERSONAL INFORMATION** *(Please attach a copy of your latest resume)*

Full Name: \_\_\_\_\_

If married, spouse's name \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ NCDL#: \_\_\_\_\_

**CONTACT INFORMATION**

Office: \_\_\_\_\_ Home: \_\_\_\_\_

Cell: \_\_\_\_\_ Pager: \_\_\_\_\_

Email: \_\_\_\_\_

**MINISTRY EXPERIENCE** *(please attach copy of ordination certificate)*

Church Name: \_\_\_\_\_

Ministry Position: \_\_\_\_\_ How long? \_\_\_\_\_

Denomination: \_\_\_\_\_ Ordained: Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes", place of ordination: \_\_\_\_\_ Date Ordained: \_\_\_\_\_

Other Ministry Experience: \_\_\_\_\_

**EDUCATION AND TRAINING** *(please attach documentation of highest degree earned)*

Your College: \_\_\_\_\_ Degree: \_\_\_\_\_

Seminary: \_\_\_\_\_ Degree: \_\_\_\_\_

Graduate School: \_\_\_\_\_ Degree: \_\_\_\_\_

Clinical Pastoral Education (Place and Date): \_\_\_\_\_

Other Training: \_\_\_\_\_

**ACTIVITIES**

List other activities and groups that you are involved with (i.e. Civic Clubs, Professional Associations, etc...)

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**REFERENCES**

List the name of each person in the appropriate space below along with the best phone number(s) to contact them. References will be contacted after your initial interview.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**REMEMBER TO ATTACH THE FOLLOWING TO THIS APPLICATION:**

- Copy of your most recent resume
- Copy of your ordination certificate
- Copy of your highest degree earned

**AUTHORIZATION FOR RELEASE OF INFORMATION AND STATEMENT OF CONSENT**

I do hereby authorize a review of all records, or any part thereof, concerning myself, by and to a duly authorized agent of the Ahsoskie Police Department, whether the said records are public or private, and including those that may be deemed to be of a privileged or confidential nature. I understand that should any statement I have made prove to be false, misleading, or erroneous it may result in rejection of my application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Application received: \_\_\_\_\_ (Date)

Action: Approved \_\_\_\_\_ (Date)      Disapproved: \_\_\_\_\_ (Date)