

Sacred Journey Interfaith Seminary

Application Form

Dear Applicant

In order to be considered for seminary admission you must follow the applicant process and meet the requirements for admission. After receipt of the completed application, fee, and two letters of recommendation, one of our Deans will contact you for an interview.

We welcome all qualified adults who are at least 21 years of age, regardless of gender, gender identity, race, religion, ethnic background, socioeconomic status, or sexual orientation. All applications will be reviewed and every candidate will be carefully considered by the Deans of the Seminary. Acceptance into seminary will be based on the applicant's background as well emotional and spiritual maturity.

We consider the following qualities for admission:

- A desire to be of service to others.
- A recognition that there are many valid spiritual faiths and paths.
- A desire to seek a deeper awareness of the Divine and to grow spiritually.
- Formal academic requirements are encouraged and applicants must be able to communicate, read, and write at a post-secondary educational level.
- Building a spiritual community is an important part of the seminary experience and therefore attendance at all classes is required. Classes meet all day (9- 4PM) monthly on Sundays (see Seminary Calendar).
- Applicants are expected to demonstrate the ability to function as part of a spiritual community and this requires a certain level of commitment to emotional and spiritual integrity, honest communication, and ethical behavior.

Additional admission criteria:

- 1. You must be at least 21 years of age with 2 years of Higher Learning (college, life experience, or equivalent).
- Submission of non-refundable application fee of \$150 can be paid online at <u>www.sacredjourneyinterfaithseminary.org</u> or by check payable to Sacred Journey Interfaith Seminary and mailed with application.
- Submit a completed typed application electronically to <u>SacredJourneySeminary@gmail.com</u> or mail to 1410 NE 26th St. Wilton Manors, FI 33305
- Have two references return the letter of recommendation application electronically to <u>SacredJourneySeminary@gmail.com</u> or mail to 1410 NE 26th ST Wilton Manors, FI 33305

APPLICATION FOR SACRED JOURNEY INTERFAITH SEMINARY ADMISSION

Name _	
Address _	
City _	State Zip
Cell Phone _	Home Phone
E-mail _	Emergency Contact
Occupation _	Age
	Correct Journey Interfaith Cominary

Sacred Journey Interfaith Seminary

Phone 954-632-0605 • SacredJourneySeminary@gmail.com • www.sacredjourneyinterfaithseminary.org



Sacred Journey Interfaith Seminary

Application Form

I have enclosed, or will have forwarded, letters of recommendation from the following people:

Submitting this form gives SJIS admissions staff permission to contact your references for clarification or if further information is needed.

Personal Reference	Professional Reference
Name	Name
Address	Address
Phone	Phone

On a separate sheet of paper please answer the following questions. Please number your answers as they are numbered on this document.

- 1. Please describe what motivated you to apply to this program. Why is an Interfaith/Interspiritual Seminary vs traditional seminary a fit for you? What you hope to get from your experience? (Please limit your answer to 2 paragraphs)
- 2. Describe your current spiritual practices. Please include how long you have been engaged in each practice.
- 3. Please describe your experience as the recipient of spiritual counseling, psychotherapy, 12 Step Recovery, or other personal growth work and include how this has supported your life and spiritual growth.
- 4. Please attach a two three page description of your spiritual journey up to now. Include:
 - What you learned from your religion of birth, the paths you have explored, how they have influenced you, and spiritual practices that have been meaningful to you.
 - A discussion of the lessons you have learned from life's challenges and the personal growth experiences that have helped you get to this point.
 - A brief description of your current relationship to Source, the God Principle, Divine Spirit.
 - If you are in a recovery program, please include any information about how that program influences your spirituality.

5. Please provide a description of your work and educational history.

Sacred Journey Interfaith Seminary Program is a two year professional training designed to prepare people to serve the spiritual needs and lives of others. The work done by anyone in spiritual leadership - ministers, spiritual directors, spiritual guides or teachers, is a sacred trust. Because of the great harm that can be done if that trust is violated or abused, we seek to ensure that our students, graduates, and faculty all adhere to the standards of ethical conduct that the public has a right to expect from anyone in a position of spiritual authority, or anyone in a helping profession.

The following questions will help us to understand any possible past or current issues we need to be aware of in order to fully and honestly assess your candidacy for this program. A "yes" answer will not automatically disqualify you from admission, but will open a necessary discussion to help us understand where you are in your process of self-understanding, growth, and readiness for service to others.

6. Do you now hold, or have you ever held a professional license or certification?

License:

State:

- a. If so, has your license/certification ever been revoked or suspended, or have you voluntarily surrendered your license?
 No Yes If yes, please explain.
- b. Are there any charges pending against you, either legal or ethical? \Box No \Box Yes If yes, please explain.
- c. Have you ever been charged with an ethical violation? \Box No \Box Yes
- d. If yes, how was the charge adjudicated and/or resolved?
- e. Within the past 15 years, have you ever engaged in conduct that could result in ethical charges being brought against you?
 No
 Yes If yes, please explain.
- 8. Are you in recovery from, or have you ever been treated for, substance abuse or a behavioral addiction? □ No □ Yes If yes, please explain.
- Have you ever been convicted of, or pleaded guilty to a crime? □ No □ Yes (If you answered yes to question 9, you must attach an additional sheet explaining the circumstances in order to be considered for admission.)

I attest that all of the information I have provided is true.

Print Name	Signature	Date
Print Name		Date

Sacred Journey Interfaith Seminary Phone 954-632-0605 • SacredJourneySeminary@gmail.com • www.sacredjourneyinterfaithseminary.org



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I		(name)	would like to	pay my application fee w	ith the following:
	Paid on SJIS W	/EBSITE (through Pa	ypal)		
	Credit Card	□ MasterCard	□ VISA	□ American Express	□ Discover
	Card #				Exp. Date
	Security Code (MC/Visa last 3	digits printed in the sig	gnature area	of the back of the card –	Am Ex four digits on front)
	Name as it appe	ears on the card:			
	By signing belo	ow, I authorize Sacre	ed Journey I	nterfaith Seminary to cl	harge my credit card.
	Signature:			Da	ate:
Ma	ake checks paya	ble to Sacred Journe	ey Interfaith	Seminary	
Please	e either electronica	ally send your complet	ed applicatio	n to:	
<u>Sacre</u>	dJourneySemina	ary@gmail.com			
Or ma	ill to:				
Sacre	d Journey Interfa	aith Seminary			
1/10	JE 26th St				

1410 NE 26th St Wilton Manors, Fl 33305



SACRED JOURNEY INTERFAITH SEMINARY

To the Applicant to Sacred Journey Interfaith Seminary: Please complete your contact information and provide this form to your two References. Submitting this form gives SJIS staff permission to contact your reference for clarification or if further information is needed.

Reference: The person whose name appears below is applying for admission to Sacred Journey Interfaith Seminary that leads to ordination as an interfaith minister. Please fill out this letter of recommendation with that in mind. Thank you. Instructions for submitting this form are below.

Applicant	Reference
Name	Name
Address	Address
City, ST Zip	City, ST Zip
Phone	Phone
E-mail	E-mail

1. How long have you known the applicant? _____

2. In what capacity (e.g., as his/her teacher, minister, spiritual counselor, friend, etc.) _____

3. How would you characterize the applicant with regard to the following? Please be frank in your answers. This is a confidential letter intended to guide us in assessing the applicant's aptitudes and capacities for undertaking training in Interfaith Ministry. Please check one box for each category listed below.

	Outstanding	Good	Fair	Poor, but Passable	Problem Area	Not Enough Info to Assess
Personal Honesty / Integrity / Values						
Emotional Maturity / Balance						
Commitment to Own Spiritual Life / Growth						
Ability to Get Along with Others						
Ability to Listen						
Motivation/Perseverance						
Self-expression (Conversational)						
Personal Appearance						
Speaking Ability – Public						
Writing Ability (Composition/Grammar)						
Academic Competence						
Creativity						

4. Overall, how would you assess the applicant's potential for ministry / service to the spiritual life and development of others?

5. Do you recommend this applicant	for admission to the Sacred Journey Interfaith Seminary
□ Yes, enthusiastically	□ Yes
\Box Yes, but with the following	g reservations:
□ No, I am unable to recom	mend this applicant for admission
6. ADDITIONAL COMMENTS:	
Signature	Date

Submission Instructions

This is a confidential letter. Sacred Journey Interfaith Seminary does not discriminate on the basis of sex, gender identity, sexual orientation, age, race, color, national or ethnic origin, or disability.

Please return this letter to Sacred Journey Interfaith Seminary

- Return to the applicant in a *sealed envelope* (write your name across the seal) to be returned by applicant, along with their application form
- Mail directly to: Sacred Journey Interfaith Seminary 1410 NE 26th St Wilton Manors, FI 33305
- Send via email to: SacredJourneySeminary@gmail.com including the applicant's full name in the subject line of the message. If sent electronically please be sure to send as a PDF (signed)



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Academic Competence						
Creativity						

Ap	plicant	Name
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Reference Name

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C	□ Yes, enthusiastically	□ Yes			
C	□ Yes, but with the following re	servations:			
-					
-					
C	□ No, I am unable to recomme	nd this applicant for admission			
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Signature	9		Date		

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