

Letter of Intent to meet the South Central Certification Committee ACPE, Inc.

I, _____ (print name),
am declaring my intent to meet the Regional Certification Committee.

Please complete the following information.

1. Meeting Spring or Fall _____ Year
2. Place of meeting for your requested appearance _____
3. Request (check one)
 Readiness Consultation Associate Extension
 Candidacy CPE Supervisor in South Central Region
 Candidacy Extension Inactive to Active Status
4. Name of your supervisor if applicable _____
5. Center _____
Center address _____
Center phone _____
6. Your preferred email address _____
7. Your preferred mailing address _____

8. Your phone numbers (H) _____ (W) _____ (C) _____
9. Religious faith group and endorser _____
10. (Optional) Cultural heritage _____
11. (Optional) Requests for one person of a certain demographic may be requested, i.e. African American member, GLBT member, etc. **Do not list a particular person.** These requests will be honored as is feasible and based on availability of current committee members.
Your request _____

Mail or e-mail this Letter of Intent to
Barbara Brumleve, SSND, Ph.D.
Chair, Certification Committee
Pastoral Services, St. John's Hospital
1235 East Cherokee
Springfield MO 65804
Barbara.brumleve@mercy.net or bbrumleve58@gmail.com

Send copy of Letter of Intent to
Deryck Durston
ACPE National Office
1549 Clairmont Road, Ste 103
Decatur GA 30033-4611
deryck@acpe.edu

Send fee to Regional Director: Rev. Stuart A. Plummer, Box 275, Fraser CO 80442-0275

7/18/2010