



*NURTURING THE CALL:*  
SPIRITUAL GUIDANCE PROGRAM

*Class of 2020*  
APPLICATION FORM

Before filling out the application, we suggest that you look at your situation in relation to the following ideal qualifications. Those who combine most of these will be given priority for admission. If you have any hesitation about applying after reading these, please call or write one of the staff for clarification.

**IDEAL CRITERIA: Individuals who**

1. Feel called to spiritual companionship for others. This involves specifically focusing on prayer/meditation experience and discernment of and response to God's activity in a person's life.
2. Have experienced a validation of this call by the fact that others have come to them to attend God in their lives.
3. Have had experience with a spiritual director or companion for themselves.
4. Have life experience and history which reflect an ongoing caring for God.
5. Desire a serious experiential and academic program with an ecumenical mix of peers in a Christian context, open to other faith traditions.
6. Actively express commitment to and seeking of the Truth of God through a religious tradition and open to learning from other traditions.
7. Have evidence of their faith community's support for their ministry of spiritual direction.



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**APPLICATION FORM - PAGE 1**

*Please enclose a non-refundable \$45 application fee and make checks payable to Shalem.*  
**PLEASE DO NOT STAPLE ANY PART OF YOUR APPLICATION.**

(Early Bird Application by 11/30 & Final Application by 1/15) \*

\* **Please Note:** Application deadline is the date that the registrar must RECEIVE completed application.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Home City, State Zip

\_\_\_\_\_ Work City, State Zip

PHONES \_\_\_\_\_  
Home Work Cell

E-MAIL \_\_\_\_\_

RELIGIOUS AFFILIATION \_\_\_\_\_ (Denomination & Community/Congregation)

SPONSORING ORGANIZATION (if any) \_\_\_\_\_

CURRENT OCCUPATION \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ HIGHEST EARNED ACADEMIC DEGREE \_\_\_\_\_ MAJOR SUBJECT \_\_\_\_\_

HEALTH CONCERNS THAT may affect your ability to fully participate in the residencies

DO YOU ANTICIPATE A GEOGRAPHIC MOVE WITHIN THE NEXT TWO YEARS? \_\_\_\_\_

How did you hear about this program? (e.g., Personal referral? An ad in a periodical – which one? Web site?)

Please indicate the name(s) of any staff member of Shalem, or graduate/associate of the Spiritual Guidance Program, whom you know fairly well.

Shalem participation, if any (Please list events attended, Shalem authors read or heard. Also, if you have participated in Shalem's online programs, please share if/how that experience influenced your decision to apply to this program.):

Outline your educational background after high school:

Outline your primary vocational history:

Are you applying for scholarship assistance? NO \_\_\_\_\_ YES \_\_\_\_\_ If yes, please enclose the Scholarship Form.



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**APPLICATION FORM - PAGE 2**

**PLEASE ANSWER QUESTIONS #1 AND #2 ON SEPARATE SHEETS OF PAPER.**

**1. PLANS FOR PROGRAM REQUIREMENTS**

- a) Plans for receiving spiritual direction for yourself, and the length of time you have been in direction.
- b) Plans for offering direction to at least two individuals who have agreed, prior to your submitting application, to be in direction with you, and the length of time you have been directing. (Please note that while we expect you to be directing two individuals throughout the Program, they need not be the same two people for the duration of the Program. Ideally they are people you have been seeing or would be directing whether or not you are in the Program.)
- c) In one paragraph, describe what actually happened in a recent, typical time in which you were a spiritual director, guide or companion for someone.
- d) Plans for access to a theological library with resources on spirituality and spiritual direction.
- e) Plans for forming a peer group, including probable members. The members must be both giving and receiving identified one-to-one spiritual direction and be willing to follow Shalem's guidelines for group process in the meetings.

**2. SHORT ESSAY**

Please provide a short essay (no more than two single-spaced or three double-spaced pages) that includes answers to the following questions:

- a) What attracts you to this program?
- b) What important life experiences lie behind this attraction? *Include the nature and extent of your giving and receiving spiritual direction/guidance, including current specific experience both as a guide and as a directee (this information is essential), and any psychological counseling received and/or given that has contributed to your insight into human nature.*
- c) What specifically do you need from such a program?
- d) With whom and where do you expect to use your learnings?
- e) What is your understanding of the intent of spiritual direction/guidance?
- f) What do you feel are the most important qualifications of a spiritual director/guide?
- g) How would you honestly assess your *assets* and *deficits* relevant to spiritual direction/guidance?
- h) What readings and personal experience have influenced your understanding of spiritual guidance?
- i) What is your sense of acceptance and support from those with whom you live and pray (family, religious community, church, etc.) for your participation in the program?
- j) Are there personal constraints (such as an anticipated move, new job responsibilities, etc.) involving spiritual direction, etc. which dictate submitting your application at this particular time only?

Please list the names, addresses and telephone numbers of two or three people whom you would trust *to know your work and potential as a spiritual director/guide.* Ask them to send us a letter of recommendation before the application deadline, following the enclosed form. (Indicate the deadline on the Recommendation Form.)

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

*Please return completed application form to:*  
SHALEM INSTITUTE, 3025 Fourth Street, NE, Washington, DC 20017  
Attn: Katy Gaughan  
**PLEASE NO CERTIFIED MAIL.**



*NURTURING THE CALL:*  
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*Class of 2020*  
RECOMMENDATION FORM

(Early Bird Application by 11/30 & Final Application by 1/15)

*Please Note: Application deadline is the date that the registrar must RECEIVE the letter of recommendation. Email is preferred to snail mail. Please do not send the letter by certified or other special mail as special delivery is not guaranteed given our office location.*

Dear \_\_\_\_\_,

As part of my application for the Shalem Spiritual Guidance Program, I am asking you to write a letter of recommendation for me. Please address the questions listed below, and provide any additional information which might help Shalem evaluate my application. Please send your response to Shalem by the above deadline.

Thank you,

\_\_\_\_\_  
(Signature of Applicant)

1. In what way are you acquainted with the applicant and his or her ministry?
2. What is your personal appraisal of the applicant's gifts, calling, and actual work as a spiritual guide for others? (Please note that "spiritual guide" implies attending specifically to people's prayer life, felt relationship with God, spiritual experiences, callings, and the like.)
3. Can you relate any comments from other people regarding the applicant's gifts and abilities as a spiritual guide?
4. What is your appraisal of the applicant's personal spiritual maturity and practice?
5. What is your opinion of the applicant's psychological maturity and stability?
6. Would you have any hesitation in referring someone to the applicant for spiritual guidance? Have you actually done so or know of others who have?
7. Please mention at least one area of the applicant's life or work that you feel is in need of growth.

Thank you again for your assistance.

*Please send your response to:*

SHALEM INSTITUTE FOR SPIRITUAL FORMATION  
KATY GAUGHAN, C/O SPIRITUAL GUIDANCE PROGRAM  
3025 Fourth Street, NE, Suite 22, Washington, DC 20017  
Telephone: (301) 897-7334, ext. 1008 • e-mail: [katy@shalem.org](mailto:katy@shalem.org) • website: [shalem.org](http://shalem.org)  
PLEASE NO CERTIFIED MAIL.

# Shalem Long-Term Programs in the Contemplative Tradition

## TUITION ASSISTANCE FORM

*Shalem is able to offer reduced tuition for a limited number of participants. Reductions are limited to a portion of tuition and are not available for room and board for residencies. Please consider carefully and prayerfully your expenses and income as you apply for assistance.  
Information you provide relative to this request will be kept confidential.*

Program to which you are applying:

- Spiritual Guidance
- Leading Contemplative Prayer Groups & Retreats
- Clergy Spiritual Life and Leadership

Name _____
Address _____ _____
Telephone _____
E-Mail _____

Faith Tradition _____
Are You: Lay <input type="checkbox"/> Clergy <input type="checkbox"/> Religious <input type="checkbox"/>
If you are able to volunteer in the Shalem office, please add any days/times available here and add any particular skills you have to offer:

Cost of Shalem program tuition _____
Your contribution _____
Amount of reduced tuition you request for this program _____
Estimated family income for the program's duration _____
Estimated essential expenses, total _____
Have you explored a potential contribution from other sources? Please explain: _____
If they are positive, how much might they contribute? _____

Any other comments that would assist us in evaluating your request for tuition assistance:
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PLEASE RETURN THIS FORM WITH YOUR PROGRAM APPLICATION AND/OR REGISTRATION TO:  
**SHALEM INSTITUTE FOR SPIRITUAL FORMATION, INC.**  
3025 Fourth Street, NE, Suite 22  
Washington, DC 20017  
**PLEASE NO CERTIFIED MAIL.**