

THE JOURNEY CENTER ASSOCIATION
2777 Yulupa Avenue #144, Santa Rosa, CA 95405
(707)200-8565
www.journeycenter.org; joanna@journeycenter.org

Application for the Spiritual Director Formation Program

Date: _____

Name: _____

Address: _____
Street/Apt. # City/State/Zip

Phone numbers: (home) _____ (other) _____

E-mail address: _____

Date of Birth: _____ Current occupation: _____

Current Faith Community affiliation, if any:

Marital/family status:

Years of school completed: _____ Degree(s): _____

Please respond to the following questions as fully as possible; your answers will help us to get to know you in terms of background, giftedness and calling.

1. Tell us what has drawn you to explore the possibility of formation in spiritual direction at this season of your life:

2. How did you hear about this program and what draws you to this particular program?

3. Briefly describe your participation in spiritual direction/companionship (speaking with another person regularly about your life and relationship with God):

7. Describe your current relationship with God and the spiritual practices that sustain you:

8. Describe for us your sense of how God has gifted you, prepared you and perhaps called you to serve as a spiritual director.

9. What do you think might be your greatest challenge/difficulty as a spiritual director?

10. Are there any other personal commitments/obligations that could potentially conflict with your participation in this program? Please explain.

11. Is there anything else that you would like us to know about you?

PERSONAL REFERENCES: List here the names and contact information of two people who know you well and can participate in this way in your discernment process. Give a reference form, which follows, to each person and ask them to return it to the Journey Center Association.

Reference #1:

Name: _____

Address: _____

Street/Apt. #

City/State/Zip

Phone numbers: (home) _____ other _____

E-mail address: _____

Reference #2:

Name: _____

Address: _____
Street/Apt. # _____ City/State/Zip _____

Phone numbers: (home) _____ other _____

E-mail address: _____

COMPLETING THE APPLICATION PROCESS:

Please return this application along with a non-refundable deposit of **\$50** to Joanna Quintrell, Executive Director via either of these methods:

- Email (joanna@journeycenter.org) + credit card payment: <https://www.journeycenter.org/donate/> (click on “donate to specific fund”, then “Spiritual Director Formation Program”)
- Regular mail: The Journey Center Association, 2777 Yulupa Avenue #144, Santa Rosa, CA 95405
- Checks should be made out to: The Journey Center Association (JCA).

All application materials, including the reference letters, must be received at the Journey Center **no later than December 31, 2021.**

Thank you for considering our Spiritual Director Formation Program and know that we are holding you in our thoughts and prayers!

LETTER OF REFERENCE #1

The Journey Center Association is offering a two-year program in spiritual direction and contemplative retreat leadership, beginning in March of 2022.

_____ is applying for this program and has given your name as a person who knows them well and can speak to their character, giftedness and potential. Thank you for taking time to complete this form, and feel free to use additional space as needed.

The deadline for receiving this applicant's materials, including this letter of reference, is December 31, 2021. The earlier we receive this, the better for the applicant...*thank you!*

1. How long have you known the applicant, and in what capacity? _____

2. Please rate the applicant on the following characteristics:

	1= This is a growth area	2= Below average	3= Average	4= This is a strength	5= Very strong
Able to listen with empathy					
Respected in their faith community					
Mature in faith and life					
Optimistic, hopeful					
Lives with integrity					
Warm, loving toward people					
Self-confident					
Trustworthy					

3. Describe how this applicant interacts in relationships (community/family/co-worker):

4. Tell us what you know of the applicant's relationship with God and current spiritual journey:

5. Is there anything else you would like us to know about the applicant? _____

Please give us your name and contact information, and sign and date below...

Name: _____

Address: _____ City _____ Zip _____

Phone: _____ Email _____

Signed: _____ Date: _____

Thank you for sharing your thoughts about your experience of this applicant! **Please return the completed reference form via email, or to the address below by December 31, 2021** and do call if you have any questions or would prefer an in-person conversation (707-200-8565):

Joanna Quintrell, Executive Director
joanna@journeycenter.org

The Journey Center Association
2777 Yulupa Avenue #144, Santa Rosa, CA 95405

LETTER OF REFERENCE #2

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The deadline for receiving this applicant's materials, including this letter of reference, is December 31, 2021. The earlier we receive this, the better for the applicant...*thank you!*

1. How long have you known the applicant, and in what capacity? _____

2. Please rate the applicant on the following characteristics:

	1= This is a growth area	2= Below average	3= Average	4= This is a strength	5= Very strong
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Respected in their faith community					
Mature in faith and life					
Optimistic, hopeful					
Lives with integrity					
Warm, loving toward people					
Self-confident					
Trustworthy					

3. Describe how this applicant interacts in relationships (community/family/co-worker):

4. Tell us what you know of the applicant's relationship with God and current spiritual journey:

5. Is there anything else you would like us to know about the applicant? _____

Please give us your name and contact information, and sign and date below...

Name: _____

Address: _____ City _____ Zip _____

Phone: _____ Email _____

Signed: _____ Date: _____

Thank you for sharing your thoughts about your experience of this applicant! **Please return the completed reference form via email, or to the address below by December 31, 2021** and do call if you have any questions or would prefer an in-person conversation (707-200-8565):

Joanna Quintrell, Executive Director

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