



Application for Military Chaplain Endorsement

[\(Link to Application Instructions\)](#)

Return to: Douglas E. Lee, Executive Director, PRJC, 6613 Thurlton Drive, Alexandria, VA 22315

Cell: 678-701-5151 / FAX: 703-719-6685

PRINTED NAME IN FULL: _____

SSN _____ DATE _____

Applying for (Check one):

- | | | | |
|-------------------|-----|---------------------|-----|
| U.S. Air Force | () | Civil Air Patrol | () |
| Air Force Reserve | () | Air National Guard | () |
| U.S. Army | () | Army National Guard | () |
| U.S. Army Reserve | () | | |
| U.S. Navy | () | U.S. Navy Reserve | () |

(Attach Photo Here)

Address: _____ **Zip:** _____

Phone: (H) _____ **(W)** _____ **(C)** _____

E-Mail Address: _____

1. Denomination: KAPC ___ KPCA ___ OPC ___ PCA ___ RPCNA ___ URCNA ___ Other(_____)

2. Presbytery: _____ **Member of** _____ **Church**

3. Ordination (include date, place, and ordaining authority): _____

4. Date and place of birth: _____

5. If naturalized, give date of final papers: _____

6. Height: _____ feet _____ inches **Weight:** _____

7. Marital status: ___ Married ___ Widowed ___ Divorced ___ Separated ___ Single

8. Wife's name: _____

9. Children (Names & Birth-years.): _____

10. If Military, provide past training or service if any (give branch, rate, rank & dates of service): _____

11. Education (give full names of institutions and exact addresses. **Enclose transcripts for all completed courses – copies are acceptable**):

Name of College _____

Address _____

Dates you attended _____

Did you graduate? _____ Degree granted: _____

Name of Seminary _____

Address _____

Dates you attended _____

Did you graduate? _____ Degree Granted _____

Name of other school(s) _____

Address _____

Dates you attended _____

Did you graduate? _____ Degree(s) granted: _____

12. Pastorates served:

<u>Name of Church</u>	<u>Address (City/ST)</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

13. Teaching experience, if any. Give dates, names of schools, and subjects taught:

14. Present Occupation. If pastor, give name of church: _____

15. Athletic experience: _____ **Musical ability:** _____

16. Business experience: _____

If now employed in addition to your ministry, state relative amount of time given to it: _____

17. To the best of your knowledge, can you say you are in excellent health and in good physical condition.

____ Yes _____ No (If 'No,' please explain) _____

18. References. Give four names and addresses to include two teaching elders and two ruling elders of your denomination. (Make 4 copies of enclosed reference forms; one for each reference, and **send to them**)

<u>Name</u>	<u>Title</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

19. Attach additional information, if desired. Feel free to answer any of the above questions on extra pages.

[NOTE: Items #20, 21 are for first-time applicants only. Chaplain Candidates applying for the Chaplaincy do not have to re-submit these two items].

20. Enclose a brief (no longer than 1 page) answer to “**What is Reformed Theology?**”

21. Enclose a brief (no longer than 1 page) **personal testimony.**

22. Fees: Please make checks payable to ‘Chaplain Ministries.’

_____ \$100 if this is a first endorsement for the Chaplaincy. This includes the fee for a Background Check.

_____ \$50 if you are a military Chaplain Candidate now applying for the Chaplaincy. This includes the fee for a Background Check

Don’t hesitate to email or call - email to: dlee@pcanet.org; phone: (678) 701-5151)

All sections of this application should be returned to:

Douglas E. Lee, Executive Director, PRJC, 6613 Thurlton Drive, Alexandria, VA 22315



STATEMENT OF INTENT

FOR MILITARY CHAPLAIN APPLICATIONS ONLY: I understand that if and when an Ecclesiastical Endorsement is written by the Executive Director of the Presbyterian and Reformed Joint Commission on Chaplains and Military Personnel (PRJC) and furnished to the Personnel Section of the Office of the Chief of Chaplains, **I am committed to accept the commission and assignment**, if selected by the accessions board. I understand that acceptance of the commission for military active and reserve/national guard duty is not less than three years.

If I am selected for military active or reserve/national guard Chaplaincy, I agree to pay the monthly dues fee as set by the Presbyterian and Reformed Joint Commission on Chaplains and Military Personnel. The current fee schedule may be found in the PRJC Chaplains Manual, found on the PRJC website at www.pca-mna.org/chaplainministries My initial endorsing fee of \$75.00 has been sent to MNA, 1700 North Brown Road, Suite 101, Lawrenceville, GA 30043.

In addition, I agree to provide the required ministry reports which are to be furnished to the Executive/Associate Directors, my Presbytery, and my supporting churches. (Reports for active duty military, are required every calendar year quarter; for military reserves/national guard, annually. If and when a reserve component military chaplain is activated, his dues amount and reporting requirements are the same as other active duty military chaplains.

If and when I am selected for military active duty I will immediately inform my Endorser, and assist the Executive Director in enlisting congregational and individual prayer support and sponsors. I also agree to update the PRJC administrative assistant each time my assignment and/or contact info or family situation changes (married, new children, etc.).

I have discussed the above topics with the Executive and/or Associate Directors of the PRJC.

Printed Full Name: _____

Address: _____

Home Telephone: _____ Cell: _____

Signed: _____ Date: _____

PRJC Background Check Authorization

Applicant:

As required by the PRJC Chaplain Commission, the last step in processing an application to be a PRJC chaplain is for us to run a criminal background, credit, and driving check on every applicant. Please complete this form, print it out, sign it, fax it to 678-825-1252, and mail the original, along with your \$100 Endorsement/Background check payable to Chaplain Ministries, c/o Douglas E. Lee, 6613 Thurlton Drive, Alexandria, VA 22315

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize the PRJC and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to PRJC or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

**The PRJC and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: _____ Date: _____

Notice to California, Minnesota and Oklahoma Residents:

Please check the box below if you wish to receive a copy of a consumer report that is requested. I wish to receive a copy of any Background Check Report on me that is requested.



PRESBYTERIAN & REFORMED
 JOINT COMMISSION ON
 CHAPLAINS & MILITARY PERSONNEL

REFERENCE FORM

Return to: Douglas E. Lee, Executive Director, 6613 Thurlton Drive, Alexandria, VA 22315
 (678) 701-5151 phone, (703) 719-6685 fax

Regarding: (Name of Applicant) _____

Elder's Name, Address, Phone: _____

The above named individual is applying for ecclesiastical endorsement as a chaplain. He has given your name as a reference, and we are asking your assistance in estimating his qualifications. In addition to the basic requirements of physical fitness, education, and successful ministry experience, it is essential that candidates shall be of strong moral and spiritual character, equipped and called for leadership among the men and women of the military forces where he will be representing our Lord Jesus Christ and our Church.

It is possible that you cannot reply to all questions. If you have no knowledge or opinion on any matter, please indicate by a dash after the question. But please reply as completely as possible, being entirely honest and candid. If your answers will not fit in the allotted space, please use the back of this form to complete your thoughts on the subject. What you write is confidential and will not be communicated to the candidate or go outside the commission.

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

2. Is he a college graduate () seminary graduate ()? Seminary: _____

In your opinion:

3. Does he show a genuine concern for people? _____

4. Has he been successful in working with people? _____

5. Would you say his Christian convictions are deep-rooted? _____

6. Does he seem to have a constructive Gospel message to young people? _____

7. Does his preaching hold the interest of those listening? _____

8. Has he any special gifts or experiences that would add to his effectiveness as a Chaplain? _____

9. Has he any eccentricities that may hamper his effectiveness? _____

10. Please indicate, using numbers 1 through 5, with the highest being 5, the applicant's emphasis in the following areas as regards his preaching and teaching:

Evangelistic () Doctrinal () Devotional () Social Concerns ()

Personal and family relationships ()

11. Please check the columns below with your candid estimate of the candidate's personal qualities:

	<u>Poor</u>	<u>Fair</u>	<u>Good</u>	<u>Excellent</u>	<u>Notes:</u>
Spoken English	()	()	()	()	
Written English	()	()	()	()	
Health	()	()	()	()	
Voice	()	()	()	()	
Mental Abilities	()	()	()	()	
Sense of Humor	()	()	()	()	
Refinement	()	()	()	()	
Tact	()	()	()	()	
Initiative	()	()	()	()	
Cooperativeness	()	()	()	()	
Emotional Stability	()	()	()	()	
Moral Stability	()	()	()	()	
Common Sense	()	()	()	()	
Physical Appearance	()	()	()	()	
Leadership Ability	()	()	()	()	
Spiritual Maturity	()	()	()	()	

12. Has he or his family any personal, domestic, or social handicaps, which would put him at a disadvantage as a Chaplain? _____

13. Is he financially responsible? Does he exercise Biblical stewardship? _____

14. If the applicant is married is his domestic life congenial? Is he the head of the family?

15. If the applicant is married will his wife sympathize with and help him in his work as Chaplain? Do you believe she could handle long periods of separation as happens in the case of many military chaplains?

16. Would you recommend him as a candidate for the Chaplaincy? _____

17. Additional Information you wish to include: _____

18. If possible, please provide include names and phone numbers of two other individuals who know the applicant well:

(1) Name _____ Position _____

Phones _____

(2) Name _____ Position _____

Phones _____

Your Signature: _____ **Date:** _____

Current Occupation: _____

WE VERY MUCH APPRECIATE YOUR HELP.

Endorsing Agency for:

- The Korean-American Presbyterian Church • The Orthodox Presbyterian Church • The Presbyterian Church in America
- The Reformed Presbyterian Church of North America •The Korean Presbyterian Church in America • United Reformed Churches in North America

**A SAMPLE LETTER FOR PRESBYTERY ENDORSEMENTS
TO MILITARY CHAPLAINCY MINISTRY**

(You may include additional information or use another format, if desired. However, all information included in the “sample” must be included in your letter. Please put the letter on your presbytery letterhead.)

Date

Presbyterian and Reformed Joint Commission on Chaplains and Military Personnel (PRJC)

ATTN: Douglas E. Lee

6613 Thurlton Drive

Alexandria, VA 22315

Dear Doug,

The (name of presbytery) of (name of denomination) hereby approves (name of applicant) in his application for (active duty chaplain, Reserve Components chaplain, or the Chaplain Candidate program) of the (branch of service: US Army, US Navy, US Air Force, Civil Air Patrol, etc.).

Mr. (name of applicant) is a member in good standing of (name of presbytery) and was (licensed, ordained, or taken under care) on (date). When Mr. (name of applicant) is actually commissioned as a chaplain, he is also appointed by (name of presbytery) to the work of an evangelist, according to our Book of Church Order, Chapter 8-6.

Signed by Clerk of Presbytery or Chairman of appropriate Presbytery committee
(name and title typed or printed below)



PRESBYTERIAN & REFORMED
 JOINT COMMISSION ON
 CHAPLAINS & MILITARY PERSONNEL

REPORT OF PERSONAL INTERVIEW

For Endorsed Military Chaplain Applicants

To the Interviewer: Thank you for conducting this interview. Your candid observations are essential to identify the best potential chaplains. Please complete Part I and II during the interview. Complete Part III immediately afterward, as you reflect on your impressions of the applicant. Keep a copy for your file, and send the original to:

Douglas E. Lee
Executive Director, PRJC
6613 Thurlton Drive, Alexandria, VA 22315

PART I. APPLICANT PERSONAL INFORMATION

Name: _____ Spouse: _____

Address: _____

Telephone: (H) _____ (W) _____ (C) _____

Social Security Number: _____ Birth date: _____ Birthplace: _____

Married: _____ Single: _____ Children's Names and Birth years: _____

Type of Chaplaincy for which you are applying: (check all that apply)

Military Chaplain

- ____ US Army *AD ____ US Army Reserve ____ Army National Guard
- ____ US Navy AD ____ US Navy Reserve
- ____ Air Force AD ____ US Air Force Reserve ____ Air Guard

* = Active Duty

1. Academic Preparation:

Baccalaureate: Name of School Granting Degree: _____
School Address: _____
Degree and Major: _____
Year Granted: _____

M. Div: Name of School Granting Degree: _____
School Address: _____
Year M.Div. Granted: _____

Other Graduate Degrees: Name of School(s) Granting Degree: _____
School Address: _____
Degree and Major: _____
Year Granted: _____

2. Pastoral Preparation:

- Denomination: KAPC ___ KPCA ___ OPC ___ PCA ___ RPCNA ___ URCNA ___ Other (_____)

- Presbytery: _____ Location: _____

- Congregation Membership _____

- You have served as (check all that apply):
___ Pastor (dates) _____
___ Elder (dates) _____
___ Deacon (dates) _____
___ Missionary/Church Planter/Evangelist (dates) _____
___ Other _____

- Subjectively, how would you describe your pastoral experience(s) to date (check all that apply):

- My ministry has generally been ___ fruitful ___ unfruitful
- I have been generally ___ happy ___ unhappy in my pastorate

- My family has been generally _____ happy _____ unhappy in my pastorate.

Comments: _____

3. What circumstances has God used to bring you to apply for the Chaplaincy? _____

4. What goals do you have in pursuing chaplain ministry? _____

5. What spiritual gifts do you bring to the chaplain ministry? _____

6. Have your family members expressed opinions on your pursuing chaplain ministry?

___ No. ___ Yes. Key people in my family are all supportive of this endeavor.

___ Yes. Key people in my family are not supportive of this endeavor.

7. Family issues needing resolution before you enter the Chaplaincy include: _____

8. Are you in good health? ___ Yes. ___ No, I suffer from _____

9. What personal or family health issues, if any, will influence your ability to minister as a chaplain?

10. American culture is pluralistic. Diverse ethnic, racial, religious, and social groups participate in and develop their particular traditions and interest within the confines of our common civilization. What contributions do you intend to make to your pluralistic culture as a distinctly Reformed and Presbyterian chaplain?

11. Ministry in a pluralistic setting gives many chaplains ample opportunity for interpersonal friction and even overt conflict between peers, superiors, and subordinates. Reflect on your ability to cooperate with chaplains and others of radically different convictions, and to do so without compromising your own.

12. How will you respond if you as a chaplain are directed to perform in a manner contrary to your convictions and/or denominational tenets? _____

13. As a chaplain, will you:

Stay in regular contact with your denomination and presbytery? ___ Yes ___ No

Support the PRJC with the required professional endorsement fees? ___ Yes ___ No

Submit all required reports to the Commission in a timely way? ___ Yes ___ No

14. Are there any moral, financial or legal issues that might impact your acceptability as a future chaplain?

___ No ___ Yes (Please explain) _____

PART II. MILITARY ISSUES

1. **“I do solemnly swear that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely and without any mental reservations or purpose of evasion; and that I will faithfully discharge the duties of the office upon which I am about to enter, so help me God.”**

This is the oath required to U.S. military officers, including chaplains. Are you prepared to take it?

___ Yes, I can take the oath in good conscience.

___ No, I cannot take the oath in good conscience.

2. Are you a U.S. citizen? ___ Yes ___ No, I am a citizen of _____

3. Do you have military experience? No ___ Yes ___ (Service, Dates, Location: _____

4. Height: _____ Weight: _____. Are you physically active (explain)? Yes ___ No ___

5. Are you available for worldwide deployment? ___ Yes ___ No

6. Have you prepared, if orders came, to leave your family and not see them again for up to a year at a time?
___ Yes ___ No

7. Have you discussed with your wife the implications for your family in the military environment and
ministry? ___ Yes ___ No

8. How do, or might, the following affect your ability to make sound and timely decisions?

Lack of familiar surroundings: _____

Lack of sleep: _____

Lack of privacy or "personal space": _____

Working on a team with ungodly, profane men: _____

Constant mobility: _____

A domineering boss: _____

Responsibility for the safety of large numbers of people: _____

Being outnumbered in a group decision: _____

Imminent physical danger: _____

9. Is there anything else I should know about your fitness to serve as a military chaplain? _____

This concludes your interview

Notes:

PART III. FOR THE INTERVIEWER ONLY

Please comment on the following:

	<u>Poor</u>	<u>Satisfactory</u>	<u>Excellent</u>
Applicant's use of English	_____	_____	_____
Applicant's clarity of expression	_____	_____	_____
Applicant's bearing and posture	_____	_____	_____
Applicant's grooming	_____	_____	_____
Applicant's poise under pressure of interview	_____	_____	_____

I DO _____ DON'T _____ judge this applicant to be fully qualified for endorsement as a chaplain in the _____ (Service Branch).

Interviewer's Signature

Date of Interview

Place of Interview

Please send this signed and completed Interview Form to:

Douglas E. Lee, Executive Director, PRJC
6613 Thurlton Drive, Alexandria, VA 22315
Or fax it to: 703-719-6685
Or scan and email it to dlee@pcanet.org