

Minneapolis Police Chaplain Application

Please Return to: Chaplain Jeffrey D. Stewart
350 South 5th Street, Minneapolis, Minnesota 55415-1314



MPD Use Only: Proceed with Background Investigation: Yes No

Date: _____ By Chaplain Supervisor: _____

Background Completed Dated: _____ By: _____

Application Approved Rejected Date: _____ By: _____

Applicant Information

Full Name			
Date of Birth		Age	
Driver's License Number		SSN	
Address			
City/State/ZIP			
Telephone: Office		Telephone: Home	
Telephone: Pager		Telephone: Cellular	
E-mail Address		Telephone: Fax	
Current Employment			How Long?
Are You a U.S. Citizen?	Yes No	Have ever been convicted of a felony?	Yes No
Any physical limitations?		Current military status?	
What special skills or qualifications do you have for police chaplaincy work?			
What motivates you to want to do police chaplaincy work?			

Ministry Information

Religious Affiliation			
Ministry Status	<input type="checkbox"/> Ordained Date: _____	<input type="checkbox"/> Licensed Date: _____	
Current Ministry Setting			
Years in Ministry		Police Chaplain Experience	
Do you affirm the Canon of Ethics of the International Conference of Police Chaplains?			Yes No
Education	School	Degree	Year
<i>College</i>			
<i>Seminary</i>			
<i>Other Graduate School</i>			
<i>Police Chaplain Training</i>			

Personal References (No relatives)

Name: _____

Address: _____

Telephone: _____

Name: _____

Address: _____

Telephone: _____

Name: _____

Address: _____

Telephone: _____

The information I have given in this application is correct and complete to the best of my knowledge. I agree that false information or significant omissions may disqualify me from further consideration for service and may be considered justification for dismissal if discovered at a later date.

Applicant's Signature : _____

Date: _____