# Baptist General Convention of Virginia

# CHAPLAINCY ECCLESIASTICAL ENDORSEMENT FOR

- Military Chaplains
- Institutional Chaplains
- Pastoral Counselors

#### Contact:

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Email: info@bgcva.org Office: (804) 228-2421 Website: www.bgcva.org

The basic mission of chaplaincy in the Baptist General Convention of Virginia is to provide pastoral care to all persons and facilitate the opportunity to pursue individual religious beliefs and practices.

# Professional Preparation

#### **ACADEMIC REQUIREMENTS**

Candidates must possess and earned Bachelor's degree from an accredited institution with at least 120 semester hours and an earned Master of Divinity degree consisting of at least 80 hours from an accredited residential seminary or school of theology.

Education must be from an institution accredited by an agency recognized

by the U.S. Department of Education. The U.S. Department of Education has a database of accredited institutions on the internet at: http://ope.ed.gov/accreditation/.

# ECCLESIASTICAL ENDORSEMENT

The applicant's association with this endorsing body must reflect at least one year of either church mentorship or Virginia Union University
Association. The endorsement will attest to the applicant's suitability for any type of ministry, support for his/her candidacy, a clear assurance statement that the applicant has no present or past legal or moral barrier to congregational ministry, and an affirmation that the applicant will facilitate persons of all faith opportunities to pursue individual religious beliefs and practices.

#### **ETHICS**

Applicants must be in conformity with suitability guidelines established for areas such as employment, financial and criminal history, intentional false statements or misrepresentation in the application, or moral turpitude.

#### RESIDENCY REQUIREMENTS

For three of the five years immediately prior to applying for an endorsement, the applicant must have resided in the United States, worked for the United States overseas in a Federal or military capacity, or be a dependent of a Federal or military employee serving overseas.

Therefore, based on the time constraints and institutional need, be aware the agency may not currently

accept applications from non-United States citizens.

#### **EXPECTATION OF APPLICANTS**

It is our expectation that the applicant take seriously what is being requested of them in the process of completing the steps to fulfill the Ecclesiastical Endorsement application. Every application will receive the proper consideration when ALL required documents have been submitted.

#### REQUIRED MATERIALS

(BGC Endorsement Application)

- \*All required materials must be submitted and labeled accordingly three months prior to applying for endorsing review:
- 1. Cover letter
- BGCVA Ecclesiastical Endorsement Application (www.bgcva.org)
- 3. References (3) total: 1 from Pastor or statement from Diaconate Ministry as to your relationship with the church.
- 4. Ordination Certificate
- 5. Proof of CPE units completed
- Copy of College Degrees: Undergraduate and Graduate
- 7. Brief description of faith journey or Résumé
- 8. Signed Covenant Agreement
- \$100 Non-refundable
   Processing Fee (Cashier's Check, made payable to Baptist General Convention of VA).

#### Mail all materials to:

Chaplaincy Endorsement
Baptist General Convention of VA
1214 W. Graham Road
Richmond, VA 23220

# **ECCESIASTICAL ENDORSEMENT APPLICATION**

| APPLICANT IN                                  | FORMATI         | ON                        |                |       |          |           |                                 |          |                             |                  |           |       |        |      |      |
|---|-----------------|---------------------------|----------------|-------|----------|-----------|---------------------------------|----------|-----------------------------|------------------|-----------|-------|--------|------|------|
| Last Name                                     |                 |                           |                |       | First    |           |                                 |          |                             |                  | M.I.      |       | Date   |      |      |
| Street Address                                |                 |                           |                |       |          |           |                                 |          |                             | Apartment/Unit # |           |       |        |      |      |
| City  |                 |                           |                |       | State    |           |                                 |          |                             |                  | ZIP       |       |        |      |      |
| Phone   |                 |                           |                |       | E-mail   | Addres    | S                               |          |                             |                  |           |       |        |      |      |
| Date(s) Available                             |                 |                           |                |       |          | Soci      | al Sec                          | curity I | No.                         |                  |           |       |        |      |      |
| Are you a citizen of the United States?       |                 |                           |                | N     | 0 🗆      | If no     | If no, are you authorized to wo |          |                             | to wo            | rk in the | u.s.? | ١      | ES 🗌 | NO 🗆 |
| Have you ever been convicted of a felony? YES |                 |                           |                | N     | 0 🗆      | If ye     | es, ex                          | olain    |                             |                  |           |       |        |      |      |
| EDUCATION                                     |                 |                           |                |       |          |           |                                 |          |                             |                  |           |       |        |      |      |
| College                                       |                 |                           |                | A     | ddress   |           |                                 |          |                             |                  |           |       |        |      |      |
| From  | То              | To Did you graduate?      |                | Y     | ES 🗌     | NO 🗆      |                                 | Degree   |                             |                  |           |       |        |      |      |
| Seminary                                      |                 |                           |                | A     | ddress   |           |                                 |          |                             |                  |           |       |        |      |      |
| From  | То              | Did you                   | graduate?      | Y     | ES 🗌     | NO        |                                 | Deg      | jree .                      |                  |           |       |        |      |      |
| Chaplaincy<br>Training                        |                 |                           |                | A     | ddress   |           |                                 |          |                             |                  |           |       |        |      |      |
| From  | То              | Required hours Completed? |                | YI    | ES 🗌     | NO 🗆      |                                 |          | ird<br>tification<br>ieved? | Date             |           |       | Agency |      |      |
| Other   |                 |                           |                | A     | ddress   |           |                                 |          |                             |                  |           |       |        |      |      |
| From  | To From         |                           |                |       | То       |           |                                 |          | Fron                        | m                |           |       |        |      |      |
| Other   |                 |                           |                | A     | ddress   |           |                                 |          |                             |                  |           |       |        |      |      |
| From  | То              | To From                   |                |       |          | То        | To F                            |          | Fror                        | From             |           |       |        |      |      |
|   |                 |                           |                |       |          |           |                                 |          |                             |                  |           |       |        |      |      |
| REFERENCES                                    | rafaccional ra  | forences (Inclu           | ido at loast s | ana i | arafacca | r or inc  | truct                           | n=1      |                             |                  |           |       |        |      |      |
| Please list three pr                          | Ulessiuliai Tei | rerences (Inclu           | ue al Ieasi U  | nie p | 01016550 | I OI IIIS | T                               | elation  | ship                        | Ī                |           |       |        |      |      |
| Church/<br>Company                            |                 |                           |                |       |          |           |                                 | none     |                             |                  |           |       |        |      |      |
| Address                                       |                 |                           |                |       |          |           |                                 |          |                             |                  |           |       |        |      |      |
| Full Name                                     | Name            |                           |                |       |          | Re        | elation                         | ship     |                             |                  |           |       |        |      |      |
| Church/<br>Company                            |                 |                           |                |       |          |           | Ph                              | one      |                             |                  |           |       |        |      |      |
| Address                                       |                 |                           |                |       |          |           |                                 |          |                             |                  |           |       |        |      |      |
| Full Name                                     | ame             |                           |                |       |          |           | Re                              | elation  | ship                        |                  |           |       |        |      |      |
| Church/<br>Company                            |                 |                           |                |       |          |           | Pł                              | one      |                             |                  |           |       |        |      |      |
| Address                                       |                 |                           |                |       |          |           |                                 |          |                             |                  |           |       |        |      |      |

| DESIRI             | ED AREA(S) OF EN             | DORSEMENT (SEL          | ECT ALL THAT          | APPLY)            |                  |              |                              |  |  |  |
|--------------------|------------------------------|-------------------------|-----------------------|-------------------|------------------|--------------|------------------------------|--|--|--|
|                    | Veteran's Affairs Ch         |                         | Hospital Chaplaincy   |                   |                  |              |                              |  |  |  |
|                    | Prison Chaplaincy (          |                         | Other:                |                   |                  |              |                              |  |  |  |
|                    |                              |                         |                       |                   |                  |              |                              |  |  |  |
| PREVIO             | OUS EMPLOYMENT               |                         |                       |                   |                  |              |                              |  |  |  |
| Church/<br>Compan  |                              |                         | Phone                 |                   |                  |              |                              |  |  |  |
| Address            |                              | Pastor/<br>Supervisor   |                       |                   |                  |              |                              |  |  |  |
| Job Title          |                              | \$                      | Endin                 | g Salary          | \$               |              |                              |  |  |  |
| Responsib          | oilities                     |                         |                       |                   |                  |              |                              |  |  |  |
| From               | То                           | Reason for<br>Leaving   |                       |                   |                  |              |                              |  |  |  |
| May we coreference | ontact your previous su<br>? | upervisor for a         | YES                   | NO                |                  |              |                              |  |  |  |
| Church/<br>Company |                              |                         |                       | Phone             |                  |              |                              |  |  |  |
| Address            |                              | Pastor/<br>Supervisor   |                       |                   |                  |              |                              |  |  |  |
| Job Title          |                              |                         | Starting Salary       | \$                | Endin            | g Salary     | \$                           |  |  |  |
| Responsib          | pilities                     |                         |                       |                   |                  |              |                              |  |  |  |
| From               | То                           | Reason for<br>Leaving   |                       |                   |                  |              |                              |  |  |  |
| May we coreference | ontact your previous su<br>? | upervisor for a         | YES                   | NO 🗆              |                  |              |                              |  |  |  |
| Church/<br>Company | Church/<br>Company           |                         |                       |                   | Phone            |              |                              |  |  |  |
| Address            |                              |                         | Pastor/<br>Supervisor |                   |                  |              |                              |  |  |  |
| Job Title          | Starting Salary              |                         |                       | \$                | Ending           | g Salary     | \$                           |  |  |  |
| Responsib          | pilities                     |                         |                       |                   |                  |              |                              |  |  |  |
| From               | То                           | Reason for<br>Leaving   |                       |                   |                  |              |                              |  |  |  |
| May we co          | ontact your previous su<br>? | ipervisor for a         | YES                   | NO 🗌              |                  |              |                              |  |  |  |
| MILITA             | RY SERVICE                   |                         |                       |                   |                  |              |                              |  |  |  |
| Branch             |                              |                         |                       |                   | Fro              | m            | То                           |  |  |  |
| Rank at Discharge  |                              |                         |                       | Type of Discharge |                  |              |                              |  |  |  |
| If other th        | nan honorable, explain       |                         |                       |                   |                  |              |                              |  |  |  |
| DISCLA             | AIMER AND SIGNA              | ATURE                   |                       |                   |                  |              |                              |  |  |  |
| I certify t        | that my answers are tr       |                         |                       |                   | lication leads t | o employment | , I understand that false or |  |  |  |
| Signature          |                              | opinion of filterview I | nay result in my ren  |                   | Date             |              |                              |  |  |  |
| Signatul           |                              |                         |                       |                   | Date             |              |                              |  |  |  |

# Ecclesiastical Endorsee's Covenant with the Baptist General Convention of Virginia

## **COVENANT**

## Please initial each item to confirm you have read it.

All pages of this document must be submitted.

|   | 1. | As a chaplain endorsed by the Baptist General Convention of Virginia, mandatory attendance is required at the following conferences hosted by the Baptist General Convention: the Annual Session and Congress of Christian Education, a week-long conference held in June and the Fall Session, a one day conference held in November. Each conference will provide continuing education and peer review for chaplaincy. |
|---|----|--|
|   | 2. | I will hold in trust the traditions and practices of my religious body.  |
|   | 3. | I will carefully adhere to whatever direction may be conveyed to me by my endorsing body (the Baptist General Convention of Virginia) for Maintenance of my endorsement.   |
|   | 4. | I will seek to provide pastoral care and ministry to persons of religious bodies other than my own within my area of responsibility with the same investment of myself that I give to members of my own religious body.  |
|   | 5. | I will work collegiality with chaplains and community ministers of religious bodies other than my own as we seek to provide a comprehensive pastoral care program for all those persons entrusted to us.   |
|   | 6. | I will respect the beliefs and traditions of my colleagues and those to whom I minister.   |
|   | 7. | I affirm the practice of a disciplined spiritual life as the foundation upon which ministry is built. I further affirm open and caring human relationships and ongoing professional and personal growth.   |
|   | 8. | I will hold in confidence all privileged communication received during the conduct of my ministry.   |
|   | 9. | I will show personal love for God in my life and ministry as I strive together with my colleagues to preserve the dignity, maintain the discipline, and promote the integrity of the profession to which I have been called.   |
| 1 | 10 | I recognize the special power afforded me by my ministerial office. I will never use that power in ways that violate the personhood of another human being.  |
|   | 11 | I promise to notify the office of Executive Minister of the Baptist General Convention of Virginia if I should ever sever ties with the Convention by joining another similar body, become a member of another denomination or join another faith.   |
|   |    |  |

# Ecclesiastical Endorsee's Covenant with the Baptist General Convention of Virginia

### COVENANT

| COVE  | 112112  |
|---|---|
| By signing below, I agree to adhere to the principl Covenant as presented by the Baptist General Commade any false statements or misrepresentations in understand that if it is discovered I have falsified a Convention will withdraw recognition of my endo | evention of Virginia. I also attest that I have not in the completion of this application. I have information herein, the Baptist General |
| Signature of Applicant  | Date  |
| Printed Name of Applicant   |   |