

August 2007 to May 2009

Dear Internship Applicant:

Thank you for your inquiry regarding our *Internship in the Art of Group Spiritual Direction*. The Internship runs from July 13 to 18, 2009. The cost is \$910 plus a \$50 application processing fee.

If you would like to apply for this program, please complete the application and return it to Mercy Center no later than May 1, 2009. A \$50.00 non-refundable/non-transferable processing fee must accompany your completed application. Please make check payable to Mercy Center.

The selection process and notification of acceptance/non-acceptance takes place as applications are processed.

If you have any further questions, please do not hesitate to contact me at 650-340-7495 or csoracco@mercyburl.org.

We ask your prayers that our program may be blessed by the Spirit and touch the lives of people throughout the world.

Sincerely,

Colleen Shannon Soracco

Colleen Shannon Soracco
Program & Project Administrator



2009 Application
Internship in the Art of Group Spiritual Direction
Mercy Center, Burlingame, California

NAME: _____

CONTACT – Please circle whether the phone number is home, work, or cell number.

PHONE 1: _____ H/W/C PHONE 2: _____ H/W/C

ADDRESS: _____ CITY: _____ STATE: _____

ZIP _____ COUNTRY: _____ E-MAIL: _____

RELIGIOUS DENOMINATION/COMMUNITY OF FAITH: _____

AFFILIATION: (Religious Community) _____

DATE OF BIRTH: ___/___/___ Married Single Religious Ordained
mo/ day/ year (Please check all that apply.)

GENERAL EDUCATIONAL BACKGROUND (Highest level completed): _____

WHAT IS YOUR PRESENT JOB/OCCUPATION? _____

NB: When completed, this form is the only information which will be considered. Please do not include any additional materials such as vitae, resume, etc.

This completed application and \$50 processing fee must be received by Mercy Center no later than May 1st.

The following questions are designed to assist the staff in getting to know you in terms of background, experience, a call to this ministry, and your expectations as they relate to our program. The questions need to be answered fully and in detail. They may be done by computer or typewriter. Please do not hand write.



1. What is attracting you to this Internship in Group Spiritual Direction? What are you hoping to receive through this training?
2. Have you been offering a form of group spiritual direction? To whom? (e.g., parish, retreat center, prayer group, etc.) Briefly describe.
3. Have you ever been in group spiritual direction as a participant? Please describe briefly.
4. Where did you receive your formal training as a spiritual director? In what year(s) did you receive your training?
5. Are you currently seeing people for individual spiritual direction?
6. Are you currently in supervision for your ministry of spiritual direction? How would you describe the supervisory process as you experience it?
7. How do you envision yourself utilizing this training?

For legal reasons, we are now required to include the following two questions:

8. Have you ever been convicted of a felony? If “yes” please explain, briefly.
9. According to ADA regulations, do you have a disability that should be known to our staff?

How did you find out about our programs in Spiritual Direction?

Date

Signature

Please Mail To:
 Colleen Shannon Soracco
 Mercy Center
 2300 Adeline Drive
 Burlingame, CA 94010-5599

