



The Evangelical Church Alliance
Military Chaplain Commission
P. O. Box 9, Bradley, Illinois 60915
Web: www.ecainternational.org
Phone: 815-937-0720

Please
 Attach
 Passport
 Quality
 Photo

APPLICATION FOR ECCLESIASTICAL ENDORSEMENT

Date: _____

Name: _____

Mailing Address: _____

City, State, Zip: _____

Cell Phone: _____ Work Phone: _____

Email Address: _____

Social Security #: _____ Height: _____ Ft. _____ In. Weight: _____ lbs.

Date of Birth: _____ Place of Birth: _____ Race: _____

1. Marital Status: _____ Number of minor Children: _____

2. Church Affiliation: _____
 (Official Name of Church You Attend)

3. Have you been ordained? _____
 (Name of Denomination/Church, Date, Place)

4. Present occupation or secular employment: _____
 (If pastor, provide name of church)

5. Paid Professional Work Experience: (Give number of years for ministry experience where you were an employee or contractor that received a 1099 or W-2):

 (1 year is equal to 2,080 hours of ministry performed)

6. Please provide the following information regarding your education:

Name/Location of School (Give full names of post high school institutions.)	Dates: From/To	Graduate: Y or N	List Degree

7. Select **ONE** of the following endorsements or approvals you are seeking. If applying for more than one endorsement, you will need to submit a separate form, along with the \$25 application fee.

- | | | | |
|---|---|--|--|
| Active Duty | Reserves | National Guard | Chaplain Candidate Program |
| <input type="checkbox"/> U.S. Army | <input type="checkbox"/> Army Reserves | <input type="checkbox"/> Army National Guard | <input type="checkbox"/> Army National Guard |
| <input type="checkbox"/> U.S. Navy | <input type="checkbox"/> Air Force Reserves | <input type="checkbox"/> Air National Guard | <input type="checkbox"/> Army Reserves |
| <input type="checkbox"/> U.S. Air Force | <input type="checkbox"/> Navy Reserves | | <input type="checkbox"/> Air Force |
| | | | <input type="checkbox"/> Navy |
| Other Programs | <input type="checkbox"/> Civil Air Patrol | <input type="checkbox"/> VA Chaplain | <input type="checkbox"/> Federal Bureau of Prisons |

8. If you selected Chaplain Candidate Program, please provide the following information:

Institution where you intend to complete your education Expected degree Expected graduation date

9. Prior military training or service: Branch, Rank, Date of Service: _____

10. Total **number of months** of prior and current Active Duty Military service.

Enlisted: _____ Officer: _____

11. Please provide the following information about your military recruiter:

Rank, Full Name

Phone

Email

Instructions

1. This application may be used for ecclesiastical endorsement for direct appointment as chaplain or ecclesiastical approval for the Chaplain Candidate Program (CCP) of the Army, Navy or Air Force.
2. Include all information requested and return one completed copy to the above address. Retain one copy for your files.
3. This form should be included with your regular ECA Membership Application. You do not need a separate photo, transcripts, testimony, or call to ministry. You do need an official transcript of your final credits that meet the minimum educational requirements for a military chaplain.
4. Enclose the processing fee of \$25.00 for this ecclesiastical endorsement application (non-refundable) and the \$100 endorsement fee. Any additional endorsements will require a new application to be submitted, along with a \$25.00 processing fee (non-refundable).

Note:

- All Active Duty Military Chaplains are required to submit an annual \$125.00 active-duty fee. This amount is in addition to the ECA Annual Membership Dues, which presently are \$175.00.
- All Chaplain Candidates are required to submit an annual report to remain in the program.

Signature

Date