

## KNOXVILLE POLICE DEPARTMENT POLICE CHAPLAIN APPLICATION

Personal Information			
Full Name (First, Middle, Last):			
Address:	City, State:	Zip Code:	
Phone #:	Email Address:		
Personal References			
<i>Family members may not be used as references. Please make sure contact information is accurate.</i>			
Name:	Phone Number or Email:	Relationship:	
1.			
2.			
3.			
Current Employer			
<i>Please make sure information is accurate.</i>			
Organization Name:	Contact Phone:	Supervisor:	Dates Employed:
1.			
2.			
3.			
4.			
Religious Affiliation			
Religious Affiliation/Denomination:		Endorsing Entity:	
Are you a member of the International Conference of Police Chaplains:    ___ Yes        ___ No			

**KNOXVILLE POLICE DEPARTMENT  
POLICE CHAPLAIN APPLICATION**

Chaplain Profile

LIST ANY CHAPLAIN / COUNSELING / MINISTERIAL SPECIFIC EDUCATION AND TRAINING WHICH YOU HAVE RECEIVED (attach additional sheets if necessary):

CHAPLAIN / MINISTRY EXPERIENCE – Check any of the ministry role(s) in which you have served in the past and provide the dates and a brief description (attach additional sheets if necessary):

Chaplain (Specify Type)       Pastor       Counselor (Licensed/Certified)

Crisis Intervention/Disaster Response       Other (Describe)

WHY DO YOU WANT TO BE A POLICE CHAPLAIN? (attach additional sheets if necessary):

*By signing, I do hereby certify that all information contained in this application is correct and accurate to the best of my knowledge. If accepted to perform Chaplain duties for the Knoxville Police Department, I understand I may be privy to confidential information and promise to respect and maintain that confidentiality.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_