

Southeast Region, Association for Clinical Pastoral Education
503 Birch River Drive, Dahlonega, GA 30533

**SCHOLARSHIP APPLICATION for the
REM 25th Invitational *in community with* ACPE Annual Conference**

Application Deadline: December 30, 2011

Mail application to: **Chaplain Sharon Garlington, DMin**
Baptist Medical Center – Downtown Campus
800 Prudential Drive, Howard Bldg., Suite 308
Jacksonville, FL 32207

Phone: 904-202-3339 E-Fax: 904-391-5571 Email: sharon.garlington@bmcjax.com

Name: _____ Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ FAX NUMBER: _____

I am currently enrolled in a CPE Program at _____

My CPE Supervisor is: _____

This is my _____ Unit of CPE. **I have registered: Y __ N __**

**NOTE: CONFIRMATION OF CONFERENCE REGISTRATION IS
REQUIRED IN ORDER TO RECEIVE A SCHOLARSHIP.**

I am requesting a Scholarship to attend the **REM 25th Invitational *in community with*
the ACPE Annual Conference** that will be held in Arlington, VA February 8-11, 2012.
My purpose for attending is:

In the next five years, I hope to utilize my CPE experience in a ministry of:

If I am granted a scholarship, I agree to provide a brief report of how my ministry has
been informed by the **REM 25th Invitational *in community with* the ACPE Annual
Conference**. I will critique the various aspects of the conference from the standpoint of
its contributions to my CPE experience. My report will be mailed or emailed by March
1, 2011 to the two listed addresses above.

(Date of Application)

(Signature of Applicant)

(Signature of CPE Supervisor)