

# Our Lady of Guadalupe Abbey

Pecos, New Mexico USA



## Application for the Pecos Benedictine School of Spiritual Direction

Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: \_\_/\_\_/\_\_\_\_ Church Affiliation: \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Session You Wish to Attend \_\_/\_\_/\_\_\_\_

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1. Briefly describe your reasons for desiring to participate in the School of Spiritual Direction.
  2. Describe any of your known spiritual gifts as mentioned in the scriptures.
  3. Please describe your experience in Church ministry and your present occupation.
  4. Briefly describe your educational background.

5. Considering the sensitive nature of this ministry, is there any incident in your past or present life that would lend suspicion or concern to your practice of Spiritual Direction? Yes \_\_\_\_ No \_\_\_\_

If yes, please provide an explanation:

6. Describe briefly your prayer life and spiritual practices.

7. Do you have a spiritual director? Yes \_\_\_\_ No \_\_\_\_

How long have you worked with him/her? \_\_\_\_\_ Years

Do you journal? Yes \_\_\_\_ No \_\_\_\_

Do you work with your dreams? Yes \_\_\_\_ No \_\_\_\_

8. Do you have any special health or dietary needs? Please indicate.

9. Please provide three letters of recommendation. One letter should be completed by your pastor or spiritual director. The second letter may be completed by your spiritual director. If you do not have a spiritual director ask another trusted individual fill out the form. The third letter should be written by a close friend. The reference forms are to be returned directly to the monastery by the persons filling out the forms.

10. Please include a recent, small photograph (2"x 3") of yourself with this application. We will discern your application as soon as these requirements have been fulfilled. Send all forms to:

**Marilyn Payer, School Facilitator**

**Pecos School for Spiritual Direction**

**PO Box 1080**

**Pecos, New Mexico 87552-1080**

