



KAIROS OUTSIDE of _____

SPIRITUAL DIRECTOR VOLUNTEER QUESTIONNAIRE

Name _____ Christian Affiliation _____

Address _____ City _____ State _____ Zip _____

Phone (home) _____ (Work) _____ (Cell) _____

Email _____ Best time / place to contact: _____

Are you fluent in another language? If yes, indicate and **check all that apply**:

Language: _____ Speak Read Write

Please **check all that apply**:

Ordained - Ordination Date: _____

Doctor of Ministry Masters of Divinity Seminary Name: _____

Awarded from school accredited by the Association of Theological Schools, comparable degree in (**circle all that apply**):

Divinity

Pastoral Care

Adult Faith Formation

Theology

Religious Education

Family Ministry

Catholic, Episcopalian, or Lutheran sister

Formal position with theological training

Ordained Episcopal Deacon

Non-ordained Lutheran Deacon

Licensed in Pastoral Counseling

In 2nd year of training for Ordination

Receiving formal training in giving Spiritual Direction

Attended 3-day weekend in Christianity as a guest on (**check all that apply**):

Kairos Outside Kairos Inside Kairos Torch Emmaus Cursillo Via de Cristo Tres Dias

Kairos Outside Qualifying Table Kairos Inside VIP Program Weekend # _____ on _____

(date)

Haven't attended a 3-day weekend

Why do you want to work a Kairos Outside Weekend? _____

We try to provide a cultural mix on our Teams; please **check one** of the following:

Native American Hispanic Asian White African-American Other _____

All Kairos Outside Activities are drug, alcohol and fragrance-free.

Attach credentials and mail back to above address