

**Anna Chaplain Course Application Form**  
**Online (Zoom), 10 October - 21 November 2024**  
**Closing Date: 5 September 2024**

**Explanatory Notes**

- The course is intended to assist in training applicants for Anna Chaplaincy with older people within their local church and community setting. There is an expectation that participants will be authorised locally for ministry as Anna Chaplains or Friends with the support of their incumbent and PCC.
- All applicants will be interviewed as part of the discernment process. You will be contacted regarding potential interview dates.
- Applicants should complete sections A1-A6 and pass the form to their incumbent to complete sections B1-B3.
- Where a parish or benefice is in interregnum applicants may wish to either postpone their application, or seek the advice and support of their Area Dean or another local minister — advice is also available from the Diocesan Mission and Ministry team (please contact Nigel Collins [ncollins@diocant.org](mailto:ncollins@diocant.org))
- Return to [Sarah Lucas](#), Diocesan House, Lady Wootton's Green, Canterbury, CT1 1NQ

**A1 Personal Details**

Title: ..... First Name: ..... Surname: .....

Name to be known by: ..... Address: .....

..... Postcode: .....

Tel (Day): ..... Tel (Eve): ..... Mob: .....

Email: ..... Date of Birth: .... / .... / .....

Emergency Contact Name and Telephone: .....

- ☐ Please tick if you are happy for your name, telephone and email to be included on a tutor and student contact list.

**A2 Personal Requirements**

Do you have a physical or other disability / condition which may necessitate special arrangements?  
Yes / No (delete as appropriate)

If yes please give details: .....

.....  
Please give details of any medical conditions, (including prescribed) medication we need to be aware of in case of an emergency:

.....  
Dietary requirements (e.g. Vegetarian, gluten free): .....

The medical information on this application form is for use by training staff and will not be divulged to any other persons with the exception (in the event of an emergency) of authorised medical personnel.

\* Decisions on course viability will be taken after the closing date. Applications for viable courses will be accepted after the closing date.

**A3**

**Course pre-requisite**

It is highly recommended that participants in the Anna Chaplaincy course have previously completed the Deepening Discipleship course or are an active lay minister.

☐

I have completed a Deepening Discipleship Course

☐

I would like to complete a Deepening Discipleship course in the near future

☐

I am currently ministering as a local lay minister / ALM / Reader (delete as appropriate)

**Interview Dates**

**via zoom (to be confirmed)**

**A4**

**Experience and Training**

Please give an outline of any experience and training that you have undertaken and your reasons for wishing to attend this course.

#### A4 Experience and Training (continued)

#### A5 Safeguarding

##### Disclosure and Barring Service (DBS) Enhanced Disclosure

This training requires an **enhanced (with barring) adult workforce disclosure** from the DBS which will disclose:

- Details of all convictions, cautions, reprimands and warnings held on the Police National Computer (PNC)
- A check of the Vulnerable Adults list
- Information held by the police which is considered relevant by a chief police officer(s)

It is the responsibility of the parish to ensure that your disclosure is satisfactory. If you do not hold an enhanced disclosure at the required level through the diocese that was issued less than 3 years ago, please contact your Parish Disclosure Officer (PDO). Further information is available from the DBS helpdesk at Diocesan House (01227 459401) or email: [safeguarding@diocant.org](mailto:safeguarding@diocant.org)

☐ I have a valid (less than 3 years old) **enhanced with barring check (adult workforce) DBS** disclosure issued through the diocese (on behalf of my current parish).

☐ I have applied for an **enhanced with barring check (adult workforce) DBS** disclosure through my parish and will provide the details above once it arrives

*Please note a valid DBS disclosure **at the correct level** must be in place by the start of the course. If you do not possess a current disclosure it is recommended that you apply for one via your PDO as soon as possible after you submit your application form.*

##### Safeguarding training

You will be required to complete training prior to starting the course. The minimum requirement is to complete the **awareness** and **foundation online modules** (for details of how to book: [www.canterburydiocese.org/safeguarding-training/](http://www.canterburydiocese.org/safeguarding-training/) ) **Please send a copy of the certificate** to [slucas@diocant.org](mailto:slucas@diocant.org) referring to this course application. If you have completed safeguarding training for leaders within the past 3 years you do not need to repeat this, but please let us know at [slucas@diocant.org](mailto:slucas@diocant.org)

#### A6 Applicants Signature

Signature: .....

Name (Printed): ..... Date ...../...../.....

**Please give this application form to your incumbent for them to complete the next section**

This course requires the incumbent / training minister to support the training with course reflection and practical ministry experience. This will need your oversight and experience so that your student's learning is grounded in local / parish ministry. In agreeing to supervise your applicant you are agreeing to create and fulfil a Training Agreement partnership throughout the course.

**On completion of the** course the Training Agreement will need to be developed into a Ministry Agreement for approval by the PCC - usually for a period of three years. By agreeing to sponsor this applicant you are agreeing to see that you or another responsible person or group provide supervision for them throughout the duration of the course.

Incumbent Signature: .....

Name (Printed): ..... Date: ...../...../.....

Incumbent Email:.....

Parish: ..... Deanery: .....

Name of Training Supervisor (if not incumbent) .....

Training Supervisor Address: .....

..... Tel: .....

Email:.....

Training Supervisor (if not incumbent) Signature: .....

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## Incumbent / Training Minister Reference (continued)

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### Parish Guidelines for potential training and authorisation:

To assist the incumbent and PCC to consider their support of the applicant for Anna ministry, they should consider the handout *Becoming an Anna Chaplain* available from the Diocesan Anna Chaplaincy web page [www.canterburydiocese.org/ministry/recognised-lay-ministry/anna-chaplaincy/](http://www.canterburydiocese.org/ministry/recognised-lay-ministry/anna-chaplaincy/).

Where the applicant is not already exercising a recognised ministry there may be a need to consider additional training in pastoral care and / or worship leading.

The incumbent and PCC should also consider how the applicants existing ministry will need to be re-shaped to include the role of Anna Chaplain or Friend. This will involve drawing up a new or revised ministry agreement to reflect and incorporate these aspects and (alongside safeguarding requirements) **must be completed before authorisation**.

### B3 PCC Sponsorship

Training for Anna Chaplaincy is provided in partnership with the Bible Reading Fellowship and the Diocese of Rochester. As the sponsoring parish of this applicant you are agreeing to support them with the intention of authorising them for Anna Chaplaincy at the end of their training. For a PCC to authorise a person in such a representative ministry, they must be satisfied that, that person will perform their duties responsibly and with congregational support.

Sponsorship approved at a PCC meeting on .....

PCC Secretary (signature): .....

Name (Printed): .....

Parish: .....

Deanery: .....