



# International Fellowship of Chaplains

PO Box 1004, Temple TX 76503  
(254) 314-2159 Fax (989) 753-3238  
www.ifoc.org. Chaplains@ifoc.org

## Advanced Chaplain Certification Renewal

Advanced Chaplain standing is renewable every 3 years for \$100 with completion of 14 hours of Continuing Education in content relevant to Chaplaincy, over the 3-year period. Chaplain can choose where to receive continuing education. The certificates awarded must relate to Chaplaincy, a topic that is relevant to area of Chaplaincy, or a skill that will enhance Chaplaincy. Certificates must include the agency, list the contact hours for the course, and must have a representative's signature from the training agency to count toward renew

### Section 1- PERSONAL DATA

Name: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone: \_\_\_\_\_ / \_\_\_\_\_ Email: \_\_\_\_\_  
Primary Secondary

I.F.O.C. Chaplain ID # \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

### Section 2- TRAINING LIST –14 hours of Continuing Education (attached copy of Certificates with renewal form)

Title of Training	Contact Hours	Date of Training
1) _____		
2) _____		
3) _____		
4) _____		
5) _____		
6) _____		
7) _____		
8) _____		

### Section 3- PAYMENT INFORMATION

Application Fee: \$100.00. Please do not send cash.

\_\_\_\_ Visa \_\_\_\_ MC \_\_\_\_ Discover \_\_\_\_ AMEX \_\_\_\_ Check or Money Order # \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Card Number Expiration Date CVV#

\_\_\_\_\_  
Signature Print Name on Card

### Section 4- AFFIRMATION

I am currently an I.F.O.C. Chaplain in good standing and affirm that I have attended the required training outlined herein.

\_\_\_\_\_  
Signature Print Name