

Completed applications should be sent to the Spiritual Life Center. Please include a non-refundable **\$25.00 application fee**. Checks should be made out to Spiritual Life Center, with a notation "Pathways" on the memo line.

PATHWAYS OF SPIRITUALITY

Spiritual Life Center

303 Tunxis Road, West Hartford, CT 06107 860-243-2374

E-mail: info@spiritlifectr.org

Website: www.spiritlifectr.org

GENERAL INFORMATION

Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

E-mail _____ Cell Phone _____

Date of Birth _____ Gender _____

Spiritual Tradition and/or Organization Affiliation, if any:

Employer _____ Position held _____

EDUCATIONAL BACKGROUND

High School or GED _____

College _____

Other _____

Background or Training in Spirituality:

(OVER)

How would you describe your Support System? (those who are there for you, with a kind word and encouragement):

SIGNIFICANT LIFE EXPERIENCE (Multi-cultural, Interfaith or Faith Exploration, Travel)

Please tell us about yourself: your story, your faith journey, what you are seeking. You may add an additional sheets if necessary.

Please include a photo of yourself to help us learn your name.