

(Document #3)  
**Letter Of Intent**  
**to meet the S.E. Region ACPE, Inc. Certification Committee**

1. \_\_\_\_\_ (Print name), am declaring my intent to meet the  
S.E. Region ACPE, Inc. Certification Committee.

**Please complete the following information:**

1. Meeting \_\_\_ Spring or \_\_\_ Fall \_\_\_\_\_ Year
2. Place of meeting for your requested appearance: \_\_\_\_\_
3. Request (check one):  
\_\_\_ ACPE Supervisor:  
    \_\_\_ Check if requesting to meet an ACPE Supervisor Committee in your region  
    Date and place of regional meeting: \_\_\_\_\_  
\_\_\_ General Consultation for: \_\_\_\_\_  
\_\_\_ Consultation for Readiness to begin Supervisory Education  
\_\_\_ Review for Supervisory Candidate Status  
\_\_\_ Extension for Supervisory Candidate Status  
\_\_\_ Extension of Associate Supervisory Status  
\_\_\_ Restoration of ACPE Supervisor Status from Inactive Status (with agreement of  
    Chairperson of ACPE Certification Commission)
4. Name of your Supervisor if applicable:
5. Center: \_\_\_\_\_  
    Address: \_\_\_\_\_  
    \_\_\_\_\_  
    Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
    E-mail: \_\_\_\_\_
6. Your preferred e-mail address: \_\_\_\_\_
7. Your preferred mailing address: \_\_\_\_\_  
    \_\_\_\_\_  
    \_\_\_\_\_
8. Your preferred phone numbers: (W) \_\_\_\_\_  
    (C) \_\_\_\_\_  
    (H) \_\_\_\_\_
9. Religious Faith Group and Endorser: \_\_\_\_\_
10. (Optional) Cultural Heritage: \_\_\_\_\_
11. (Optional) Requests for one person of a certain demographic may be requested to serve on your committee, i.e., African American, GLBT, Faith Group members, etc. **Do not list a particular person.** These requests will be honored as is feasible and based on availability of current committee members. Your request: \_\_\_\_\_

Mail or e-mail this Letter of Intent to both:

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ACPE, Inc.  
One West Court Square, Suite 325  
Decatur, GA 30030  
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