

**Certified Spiritual Educator**

**Enrollment Application**

***Boxes will enlarge as you type into them.***

Name:

Email:

Address:

City:

State:       ZIP:

Birth date:       Phone:

Church name:

Current Position in Church:       # of years in position

Church Address:

City:       State:

ZIP:       Church Phone:

Church Email:

Church Website:

**Minister’s Endorsement**

As minister/spiritual leader of this church, I hereby endorse the applicant’s intention to become a Certified Spiritual Educator.

Minister/Spiritual Leader’s Name

Minister’s/Spiritual Leader’s Signature

**Mail or Email to: Diane Venzera**

**200 Unity Circle North, Suite A**

**Lee’s Summit, MO  64086**

**DVenzera@unity.org**