



# Chaplaincy Endorsement Commission

Christian Churches and Churches of Christ

[chaplainec@gmail.com](mailto:chaplainec@gmail.com)

703-965-1495

[www.cec-chap.org](http://www.cec-chap.org)

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Letter of intent/request.

Picture (Passport type).

Your address.

Your telephone Number.

Your e-mail address.

Your birth date.

Your Social Security number.

\$25.00 Non-refundable Application Fee.

Selection of Component.

Official Transcript from the Colleges you attended.

Letter from the Seminary where you attend stating that you are enrolled as a full time, resident student in the M.Div. Program.

Letter from the church where you are a member and attend regularly stating that you are member in good standing with the Christian Churches and Churches of Christ.

3 Reference letters:

The President or Dean of the College where you attended.

A Professor of the College where you attended.

An Elder of the church where you a member and attend regularly.

\*Mail to Dr. Kal McAlexander at **PO Box 861571, Vint Hill, VA 20187**