

# Companions

## In the Ministry of the Ignatian Spiritual Exercises

### Application for Admission

As a

## Giver of the Full Spiritual Exercises Member

**Givers of the Full Spiritual Exercises Members** are recognised as those people who have completed the full Spiritual Exercises, either as an enclosed 30-day retreat, or a 30-week retreat in daily life. They have completed a formation program that meets the Standard for the Formation of Givers of the Ignatian Spiritual Exercises and are actively involved in the ministry of giving the Spiritual Exercises<sup>1</sup>.

An applicant applying for Giver of the full Spiritual Exercises Membership must have directed at least two retreatants through the full Spiritual Exercises according to either the 19<sup>th</sup> or 20<sup>th</sup> annotation under supervision.

### Instructions to the Applicant

1. An applicant seeking membership of the *Companions in the Ministry of the Ignatian Spiritual Exercises* as a Giver of the full Spiritual Exercises Member must complete all sections of this Application Form.
2. The Annual Membership Fee of \$160AUD may be made by EFT transfer. See details in Section 7 – Payment.
3. Please sign and date the Application Form and return it with all other material required to the address given in Section 7.
4. Unsuccessful applications will be refunded the Annual Membership Fee.
5. The information in this Application will be treated as confidential and used only in accord with the Privacy Act.
6. *Companions* is a professional association of those engaged in the ministry of the Ignatian Spiritual Exercises. The applicant must read the Code of Ethics for Givers of the Full Spiritual Exercises and Catholic Church documents on a Safe Church (link found on website). Permission to publish member's name on website is part of this Registration.

### Section 1 - Personal Information *(please print)*

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Town/City \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone (Mob) \_\_\_\_\_ (H) \_\_\_\_\_

Email: \_\_\_\_\_

Gender: \_\_\_\_\_ Occupation: \_\_\_\_\_

<sup>1</sup>Constitution of the Companions 6(b)(ii)

## Section 2 – Your experience of making of the full Spiritual Exercises

All applicants for membership of *Companions* as a Giver of the Full Spiritual Exercises Member need to have completed the full Spiritual Exercises of Saint Ignatius of Loyola, either as a thirty-day retreat according to Annotation 20, or as an individually-directed retreat in daily life according to Annotation 19.

Under which Annotation did you make the Exercises?

Annotation 19

Annotation 20

Where did you make the Spiritual Exercises? *(Please include the name of the country, the name of the retreat centre and so on.)*

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In what year did you make the Spiritual Exercises?

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Who gave you the Exercises?

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## Section 3 – Details of your formation as a Giver of the Spiritual Exercises

*Companions* requires 50 hours of face-to-face supervision in addition to 200 hours of student contact for Giver of the full Spiritual Exercises Members. A component of the supervision with an approved supervisor must be completed after the 200 hours of face-to-face student contact (*Membership and Eligibility Requirements* on website). Please give details of the formation program for Givers of the Spiritual Exercises that you have completed.

Institution (full name)	Degree/Diplomas/Post Graduate qualifications	Month and Year Completed

Please give the number of student contact hours completed and supervision hours completed

Student Contact Hours \_\_\_\_\_ Supervision Hours \_\_\_\_\_

Some givers of the Exercises have a wealth of experience and an obvious charism for the ministry. These men and women may have practiced this ministry for many years without necessarily having completed a recognised formation program. *Companions* will formally recognise those givers of the Exercises who can demonstrate prior learning or equivalent competence, knowledge, and experience. They will need to provide a detailed description of their experience as a giver and any other education that is relevant, e.g., theology, biblical studies, counselling and so on.

**Please read the following regarding supporting documentation:**

- As evidence of your studies, please enclose any academic transcripts itemising each subject undertaken, and certificates showing completion or conferral of each award.
- Academic transcripts and certificates may be submitted in photocopy format. Please note that any documentation submitted to the association will not be returned.

**Section 4 – Statement of your practice of giving the Exercises**

I have given the full Spiritual Exercises according to the 19<sup>th</sup> or 20<sup>th</sup> Annotation under supervision

Yes  No

Please detail your experience of giving the 19<sup>th</sup> Annotation retreat (the full Spiritual Exercises given over a period of thirty-five weeks in the flow of daily life) and / or 20<sup>th</sup> Annotation retreat (the thirty-day retreat).

Please give the place/s where and date/s when you gave the full Spiritual Exercises (but not to whom).

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Supervision: Please give the name of the supervisor you now see in your practice of giving the Spiritual Exercises.

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Institutional Affiliation: Please give details of the organisation/s with whom you work as a giver of the Spiritual Exercises.

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Name of church/Agency/Institution or other employer \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

## Section 5 – Working with Children Check

It is a requirement of *Companions* that all members hold a current Working with Children check/authorisation for the respective State, Territory, or jurisdiction in which the member lives, and to provide the Secretary of *Companions* with a photocopy of this authorisation.

I understand that I am required to have a current Working with Children check/authorisation for the State, Territory, or jurisdiction in which I live.

I attach a photocopy of this authorisation .....

I will send an electronic copy to the Secretary .....

I will send a copy in the mail.....

## Section 6 – Declaration

I have read *Companions* Code of Ethics

I have accessed and read the Catholic Church documents on a Safe Church

If admitted as a **Giver of the Full Spiritual Exercises Member**, I understand that I will be bound by the *Constitution of the Companions in the Ministry of the Ignatian Spiritual Exercises Incorporated* and *The Code of Ethics for Givers of the Ignatian Spiritual Exercises*, and any other rules or regulations adopted by *Companions*. (Copies of the above documents are available on the Website, by email or writing to the Secretary of *Companions*.)

I declare that all information submitted by me in this application is true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Section 7 – Payment

The Annual Membership Fee for a Giver of the full Spiritual Exercises Member is \$160.

### EFT transfer

**Account Name:** Companions in the Ministry of the Ignatian Spiritual Exercises  
**Bank:** Bank Australia  
**Account BSB:** 313 140  
**Account #:** 12107516

PLEASE PROVIDE **YOUR NAME** IN THE REFERENCE FIELD

To ensure that your payment is allocated correctly, please email our Treasurer at [admin@companions.org.au](mailto:admin@companions.org.au) when you have placed an EFT.

Members may apply in writing for a partial exemption from the annual membership fee on special consideration grounds. Such applications will be dealt with confidentially, on a case by case basis, and should be forwarded to the Secretary of *Companions* at the address below.

Once you have completed this form please return it to the address below. If you require help with your application, or need more information, please email our Secretary at [secretary@companions.org.au](mailto:secretary@companions.org.au)

**The Secretary**  
**Companions in the Ministry of the Spiritual Exercises Incorporated**  
**PO Box 2260**  
**KEW VIC 3101**