Deepening Discipleship Application Form
Autumn 2024 - Online via Zoom
Closing Date: 18 September 2024

DEEPENING Discipleship

- 2 October 2024, 7.00pm-8.30pm
- 9 October 2024, 7.00pm-8.30pm
- 16 October 2024, 7.00pm-8.30pm
- 23 October 2024, 7.00pm-8.30pm
- 6 November 2024, 7.00pm-8.30pm
- 13 November2024, 7.00pm-8.30pm
- 20 November 2024, 7.00pm-8.30pm
- 27 November 2024, 7.00pm-8.30pm

Dear Deepening Discipleship Applicant
Please complete sections 1-6 and return to Sarah Lucas, slucas@diocant.org or Diocesan House, Lady Wootton's Green, Canterbury, CT1 1NQ

1. Personal Details

Title: First Name: Surname:

Address:

Postcode:

Tel (Day): Tel (Eve): Mob:

Email: Date of Birth: / /

Emergency Contact Name and Tel:

Include / Do not include my name / email / telephone/ on student and tutor contact list. (Delete as required)

2. Personal Requirements
Do you have any physical or other disability / condition which might necessitate special arrangements? Yes / No (delete as appropriate) If yes please give details:

Please give details of any medical conditions (including prescribed medication) we need to be aware of in case of an emergency. (Not required for online courses)

Dietary requirements - e.g., Vegetarian, Dairy free (Not required for online courses)

The medical information on this application is for use by Deepening Discipleship Staff and will not be divulged to any other persons with the exception (in the event of an emergency) authorised medical personnel.

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3. Please give a brief summary of why you'd like to participate in a Deepening Discipleship course and what you hope to gain from it. (Optional but helpful)

4. Course Accompanier Details.

A course accompanier is someone who the course participant can meet with over the period of the course to reflect on its application to the participant's discipleship journey. If you need help finding an accompanier contact Sarah Lucas, slucas@diocant.org or speak with your incumbent. Guidelines for Course Accompaniers accompany this application form.

Title: First Name: Surname:

Tel: Email:

5. Incumbent and Parish Details

Incumbent Name:

Parish: Deanery:

6. Applicant Signature

Signature / E-Signature:

Name (Printed): Date: / /