

Preliminary Discernment Process for Prospective Trainees Contemplative Companions in Spiritual Direction Training Program (CCSDTP)

Name:		Gender: F / M
Age:		Date of Information:
	e following questions are designed to help us c gaging with <i>CCSDTP</i> toward your involvement	o-discern God's call and God's timing with you in in the ministry of spiritual direction.
1.	Why are you interested in spiritual direction? What attracts you to spiritual direction?	
2.	What are your positive and negative experience a. Positive	es with spiritual direction?
	b. <u>Negative</u>	
3.	How long have you been seeing a spiritual dire	ctor?
1	How often do you see your spiritual director?	
4.	now often do you see your spiritual director:	
5.	What are your experiences with guided silent r	etreats? Please state the number of days.
6.	How often do you make a guided silent retreat	?
7	What are some of your significant agranianees	of Cod's transforming work in your inner being?
7.	what are some of your significant experiences	of God's transforming work in your inner being?
8.	How would you describe your relationship with	n God now?

9. What spiritual disciplines do you practise regularly to nurture your relationship with God?		
10. What do you think of yourself, and how do you feel about yourself?a. Positive Traits + Feelings:		
b. Negative Traits + Feelings:		
11. What motivates you to want to be trained as a spiritual director? What is your dream? a. <u>Motivation</u> :		
b. <u>Dream</u> :		
12. What are the Spiritual Direction Courses you have attended?		
13. What books have you read on Spiritual Direction?		
14. How would be the context you will be working in after your training?		
Please provide two names for references: (1) your pastor/church leader who knows you & understand what spiritual direction is; (2) your spiritual director.		
We shall follow up with a personal conversation as part of our co-discerning process.		
Thank you for your patience as we wait prayerfully on God's guidance for God's way of proceeding.		
Please return your completed form to <i>CCSDTP Coordinator</i> : Dr Voon Choon Khing by Email: ck2stm@gmail.com		