



SPE Unit Invoice-Report Form CPE and PCE

To be completed and forwarded to the National Office – see deadlines attached.

NOTE: The registration fee of \$200 is the fee of developing the unit and does not include membership with CAPPE/ACPEP. In addition to the registration fee above, the current annual membership fee must be paid if the student is taking an advanced CPE or PCE level course.

Name of SPE Centre:	
Address:	
City:	Prov:
Postal Code:	Phone:
Fax:	Email:

Accredited Cluster or Centre:
Seminary Affiliation:
Dates of Unit:
Teaching Supervisor:
Report Writer (If Different than Supervisor):

Name & Mailing Address of Student	Check Level of Education				Circle One	Fee (\$)
	Unit	1st	2nd	3rd		
Name: Address: Phone: Email: <div style="font-size: 48px; text-align: center; margin-top: 20px;">1</div>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CPE	\$200
	Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCE	
	Provisional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name: Address: Phone: Email: <div style="font-size: 48px; text-align: center; margin-top: 20px;">2</div>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CPE	\$200
	Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCE	
	Provisional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name: Address: Phone: Email: <div style="font-size: 48px; text-align: center; margin-top: 20px;">3</div>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CPE	\$200
	Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCE	
	Provisional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name: Address: Phone: Email: <div style="font-size: 48px; text-align: center; margin-top: 20px;">4</div>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CPE	\$200
	Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCE	
	Provisional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name: Address: Phone: Email: <div style="font-size: 48px; text-align: center; margin-top: 20px;">5</div>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CPE	\$200
	Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCE	
	Provisional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name: Address: Phone: Email: <div style="font-size: 48px; text-align: center; margin-top: 20px;">6</div>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CPE	\$200
	Advanced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCE	
	Provisional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Please send <u>Cheque</u> or <u>Money Order</u> with this Invoice-Report Form.					Total Fee: Mail with Form	\$
Mail To : CAPPE/ACPEP 7960 St. Margaret's Bay Rd, Ingramport, Nova Scotia B3Z 3Z7						

Please see back of form for procedure and guidelines
Disponible en français

CAPPE/ACPEP Supervised Pastoral Education Unit Invoice-Report Form

Procedures and Guidelines:

1. This form is a combined Invoice and Unit Report.
2. CPE Unit: To be completed and forwarded to the National Office within one month of beginning of the unit.
3. PCE Unit: To be completed after 100 hours of supervised clinical counselling service at the basic level of education and after 125 hours of supervised clinical counselling service at the advanced level of education, at the same time that an evaluation is completed.
4. Please ensure form is complete, printed and legible. Incomplete and illegible forms delay processing and cause unnecessary errors on the Student's certificate of completion.
5. Students will not be recorded unless a Cheque or Money Order for registration accompanies this Invoice-Report Form. The cheque must be from the SPE Centre, not from the individual students.
6. Forward Invoice-Report Form and Fees (payable to CAPPE) to the National Office:

CAPPE/ACPEP
7960 St. Margaret's Bay Rd
Ingramport, Nova Scotia
B3Z 3Z7

7. The National Office will issue the certificates of completion and forward them to the Teaching Supervisor without delay.

Supervisor's Signature _____

E-Mail address: _____

8. If you have questions about completing the form, please contact the office:
Telephone: Local: (902) 820-3085 – Toll free: 1-866-44CAPPE or 1-866-442-2773
Fax: (902) 820-3087 – Email: office@cappe.org
9. A receipt will be issued to the Teaching Centre once the Invoice-Report Form is received with your payment of registration fees.
10. If a Provisional Supervisor is involved in the program, please sign below:

Signature _____

This form can also be downloaded from CAPPE/ACPEP's website
under: Forms-Formes

www.cappe.org