## **Maintenance of Certification Peer Review Report Form**



Please complete this form immediately after the peer review and return within 10 days or by December 31, whichever comes first. E-mail to <a href="mailto:info@professionalchaplains.org">info@professionalchaplains.org</a> or fax to 847.240.1015. Keep a copy of this report for your records.

Chaplai	in:	
Address	S:	
Phone:	E-mail:	
Review	Date/Place:	
Full Nar	me of Faith Group:	
□ Iha	ave recently changed faith groups. Therefore, a letter of endorsement/support will be sent to BCCI by the	faith group.
	eview Guidelines Fulfilled: ines found at www.professionalchaplains.org/BCCI under Maintenance of Certification	
Review	w and check all that have been fulfilled:  Minimum of three committee members present, two of whom are BCCI board certified of certified chaplains. (See Peer Review Guidelines, "Composition of Committee.")  Peer Review was a minimum of 90-minutes.  Committee received written materials.  Reviewee received written summary report with recommendations following the meeting.	r associate
	Froup Connection:  v and check all that have been fulfilled: I attest that I have an ongoing connection with my faith community for accountability and nur person and my practice as a professional chaplain, per maintenance of certification standard I attest that I have fulfilled my faith group's requirements for my work as a chaplain. I have discussed my faith group connection with my Peer Review Committee.	
Reviewee	Signature Date	
will be i	If any of the above were not fulfilled, please attach an explanation of attempts to meet the guidelines. reviewed for acceptance of exception to guidelines.  eview committee members (Please sign and then print your names in the spaces below.)	Explanations
	1. Name:(sign) BCCI board certified chaplain □ BCCI associate certified chaplain	(print)
	2 Name:(sign) ☐ BCCI board certified chaplain ☐ BCCI associate certified chaplain	(print)
	3. Name:(sign) BCCI board certified chaplain BCCI associate certified chaplain	(print)
	4. Name:(sign) BCCI board certified chaplain BCCI associate certified chaplain	(print)