



**The National Conference of Veterans Affairs
Catholic Chaplains (NCVACC)**

Established: 1985

Endorsement: Archdiocese for the Military Services, USA

NCVACC MEMBERSHIP APPLICATION FORM

A. PERSONAL INFORMATION

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email Address:¹ _____

Date of Ordination: _____ Place: _____

B. BOARD CHAPLAIN CERTIFICATION²

BCC Certifying Body: _____

Certification Date: _____ Expiration: _____

CPE Units Acquired: _____

C. SPECIALTY CERTIFICATION³

Area of Specialty: _____

Certifying Body: _____

Certification Date: _____ Expiration: _____

D. VA ASSIGNMENT

Position: _____

Facility Name: _____

Facility Address: _____

City: _____ State: _____ Zip: _____

E. SCHEDULE OF FEES

- \$150.00 Full-Time
- \$ 75.00 BCC-VA
- \$ 75.00 Part-Time (Includes Fee Basis, Contract, Intermittent)

Note 1: The Bylaws states that dues are due by January 1.

Note 2: Please PRINT, FILL UP, then MAIL with Check PAYMENT to:

Chaplain Patrick Fitzsimons
1065 Ashmore Drive
Nashville, TN 37211

¹ No VA email address to be used.
² Needed for GS-11 and Above (Cf. VA Handbook 5005/135, 09-24-2020)
³ Needed for GS-12 (Cf. VA Handbook 5005/135, 09-24-2020)