



## DOCTOR OF MINISTRY DEGREE APPLICATION

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Full Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_ .com

Are you Ordained? :      Yes      No      Date of Ordination: \_\_\_\_\_

Exact Seminary G.P.A.: \_\_\_\_\_ School you wish to attend: \_\_\_\_\_

Have you been accepted for a D. Min. program?      Yes      No

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Write a proposal, typed and double-spaced, addressing the following:

A. Please write a detailed description explaining the total cost for the program.

B. How will you complete the degree? (you may use a flow chart).

1. Classes each quarter / semester.
2. Study time.
3. Impact on your church program (detail each year).

C. What is your major focus for the degree?

D. What are the benefits for your ministry?

1. During the time you are pursuing the D. Min. degree.
2. After you complete the D. Min. degree.