

SECRETARIAT

Pastoral Ministry—MAPM Application Form Please PRINT all information. Credential I.D. Title: (Missionary License, Ministerial License & Ordained Minister) NAME: ______FIRST **MIDDLE** ADDRESS: ______Number & Street Apt# City State Zip PHONES: (_____ (____ Home Business SNEC E-Mail Address (REQUIRED): _____ Gender: Male_____ Female_____ Check off any CHANGES: New Address New Phone New email Deacon Ordained or not Ordained ☐ Elder-ordained or not ordained ☐ The year since completing the BA in Religion (BA. R.) ____ ☐ The year since completing the BA in Theology (BA. Th) _____ ☐ Years of service in SNEC _____ REGISTERING FOR (Please write in academic year): Academic Year 20 _____ - 20 _____ Check the program year you are registering for: 1st Year___ 2nd Year___ 3rd Year___ Continuing___ General Ministries (English-MAPM) 1st Year____ General Ministries (Spanish -MAPM) 2nd Year___ 3rd Year___ Continuing___ General Ministries (MA in Religion) 2nd Year___ 3rd Year___ Continuing___ 1st Year___ 1st Year___ 2nd Year___ 3rd Year___ Continuing___ General Ministries (MA Discipleship in Lifespan): 1st Year___ 2nd Year___ 3rd Year___ Continuing___ Hybrid - Summer Intensive (MDiv): STUDENT SIGNATURE: _____ Administration ONLY: APPROVALS: Ministerial Department: _____ AdCom: ____ Treasury Office: _____

To enroll in the Master's in Pastoral Ministry program, a formal letter of request must be submitted to the SNEC Secretary and the Ministerial Department. This request will be reviewed and discussed, with final approval required from the Administrative Committee (AdCom). For additional guidance, please refer to the North American Division (NAD) Working Policy, section FEA 37 25.