

SAN FRANCISCO
THEOLOGICAL
SEMINARY



DOCTOR OF MINISTRY
APPLICATION MATERIALS

Please send this form first, before assembling the other materials needed.

In addition to this completed form, we will need from you:

1. Official transcripts of your seminary course of study and any other relevant postgraduate work.
2. Six references. Send one of the enclosed forms to each reference along with a stamped return envelope addressed to the APS office. Please write the names and addresses of your references on the space provided on this form. You may waive the right of access by signing the form.
3. A short (not over five pages) typewritten sample of your writing that shows your ability to present and integrate ideas. This can be an academic paper, a book review, or a sermon which incorporates references to scholarly or cultural materials.
4. A statement from your church or agency supporting your proposal to participate in advanced study, if this is appropriate.
5. A recent photograph of yourself no larger than 2.5 x 3.5 inches. It need not be a formal portrait; a clear snapshot is fine.
6. A \$35.00 non-refundable application fee. This need not be submitted with the form itself.

All application materials must be submitted in English and will become part of the Seminary's permanent record.

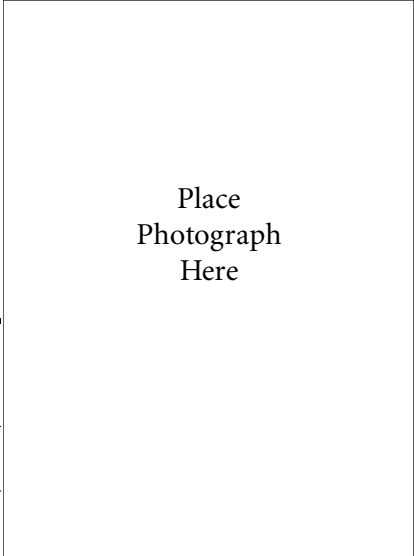
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Toll-free: 800.447.8820 ext.865 • Tel: 415.451.2865 • Fax: 415.451.2851



DOCTOR OF MINISTRY
DEGREE PROGRAM



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APPLICATION FORM

LAST NAME	FIRST NAME	MIDDLE NAME
DATE OF BIRTH	PLACE OF BIRTH	CITIZENSHIP
SOCIAL SECURITY #	EMAIL ADDRESS	

<i>Please check address preferral for receiving mail</i>	<input type="checkbox"/> HOME ADDRESS	CITY/STATE/ZIP	(AREA) TELEPHONE
	<input type="checkbox"/> BUSINESS ADDRESS	CITY/STATE/ZIP	(AREA) TELEPHONE

DATE AND PLACE OF ORDINATION _____ ORDAINED BY _____

CHURCH MEMBERSHIP _____ DENOMINATION _____

MARITAL STATUS _____ NAME OF SPOUSE _____

CHILDREN: NAME/AGE NAME/AGE NAME/AGE

ACADEMIC INFORMATION: List college, professional, and post-graduate study.

INSTITUTION	CITY/STATE/COUNTRY	DATES	DEGREE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PASTORAL SERVICE: List pastoral and ecclesiastical employment.

CHURCH OR AGENCY	CITY/STATE/COUNTRY	DATES	POSITION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PRESENT EMPLOYMENT

EMPLOYER/CHURCH	CITY/STATE/COUNTRY	YEARS EMPLOYED	POSITION
_____	_____	_____	_____

BUSINESS / PROFESSIONAL EXPERIENCE: (Describe briefly jobs held longer than one year).

Check Degree Option for which you are applying:

- Option 1 On-site collegium group. Location: _____ Year: _____
- Option 2 On-campus intensive collegium group. Year: _____
- Option 3 Year in residence for international clergy on sabbatical. Year: _____
- Option 4 International Feminist Theologies. Year: _____

(see reverse side)

REFERENCES :

- A. Representative of local church, agency, governing board, or its equivalent
- B. Official of denomination or regional agency, or its equivalent
- C. Two lay people close to your work
- D. Two clergy acquainted with your work

	NAME	ADDRESS/CITY/STATE/ZIP/COUNTRY
A.	_____	_____
B.	_____	_____
C.	_____	_____
	_____	_____
D.	_____	_____
	_____	_____

I hereby apply to be admitted as a student in the Doctor of Ministry Program of San Francisco Theological Seminary.

DATE _____ SIGNATURE _____

DOCTOR OF MINISTRY

REFERENCE FORM

APPLICANT

REFERENCE

NAME

NAME

ADDRESS

ADDRESS

VOCATION

The Doctor of Ministry program is a part-time in-service program designed to develop high competence in critical scholarship as related to the practice of ministry. Please complete this reference form and return it to us at your earliest convenience. Typing your answers will be appreciated; attach additional sheets if necessary to complete all answers. *It helps if you recognize, as we do, that a wholly positive report is not apt to be balanced, complete, or useful.*

- I. How long and in what capacity have you known the applicant?

- II. Describe a critical event that illustrates the candidate's effectiveness in ministry in one of the following areas: human relationships, intellectual strength, community service, prophetic insight, group leadership.

- III. In comparison with other ministers you know, where do you place this candidate?
among top 10% _____ among top 25% _____ among top 50% _____

- IV. What areas of learning and growth would be particularly helpful for the applicant in his/her ministry?

- V. What factors in the life of the candidate might prevent him/her from completing the D.Min. program?

- VI. Please provide other important data about the candidate you wish the committee to know and evaluate.

REFERENCE'S Signature _____ Date _____

I understand that this recommendation will be used only for admission purposes, and I hereby waive my right of access to this recommendation. NOTE: If this waiver is not signed by the applicant, s/he has the right to read this recommendation.

APPLICANT'S Signature _____ Date _____

PLEASE RETURN TO The Advanced Pastoral Studies Office

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