



MINISTRY PRACTICUM ACTIVITY LOG

DATE: _____

OFFICE USE ONLY: DATE RECEIVED _____

IMPORTANT: PLEASE PRINT OR TYPE, except for boxes marked “signature.” This form is required of all undergraduate students taking courses for college credit. It ensures that a student receives proper credit for fulfilling his/her obligation to serve a minimum of 72 hours per year in the ministry of the church he/she attends. It is the student’s responsibility to ensure that this form is completed and submitted to the Campus Director no later than eight (8) weeks before completion of each program. Fill out one line of Section #3 per job performed. Please keep a photocopy of the completed form for your records.

1. PERSONAL INFORMATION

STUDENT NUMBER	<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> REV. <input type="checkbox"/> MS. <input type="checkbox"/> MISS <input type="checkbox"/> DR.	LAST NAME	FIRST NAME	M..I.	<input type="checkbox"/> SR. <input type="checkbox"/> JR. <input type="checkbox"/> _____	MAIDEN NAME
BIBLE COLLEGE: <input type="checkbox"/> DIPLOMA IN THEOLOGY <input type="checkbox"/> ASSOCIATE IN THEOLOGY <input type="checkbox"/> ASSOCIATE OF ARTS IN THEOLOGY			STUDENT SIGNATURE			

2. CHURCH INFORMATION

CHURCH NAME				
ADDRESS	CITY	STATE/PROVINCE	POSTAL CODE	COUNTRY
SENIOR PASTOR NAME		OFFICE AREA CODE & PHONE NUMBER	OFFICE AREA CODE & FAX NUMBER	

3. SERVICE RECORDS

TYPE OF MINISTRY	START DATE	STOP DATE	HOURS	SUPERVISOR NAME	SUPERVISOR SIGNATURE*

* Supervisors: Your signature attests that the student performed his/her assigned tasks in a faithful & satisfactory manner.