

Your Name _____ **Today's Date** _____ **Level of Degree You are Requesting** (circle one): ABS, BA, MTh, DTh
Your Phone Number: _____ **2nd Phone Number:** _____ **Email Address:** _____

Christian Service	Dates (From/To)	Name of Group	What I did in this ministry	Hrs per week	Total Hours
Administration/Finance					
Bible College Teacher					
Bible Study Teacher					
Church/Ministry Counseling					
Help with Church/Ministry					
Missions/Evangel Ministry					
Pastor or Assist. Pastor					
Worship Leader					
Youth Leader					
Seminars (For Ministry)					
Sunday School Teacher					
Rehabilitation Centers					
Homeless Shelter					
Other					

If you list a ministry, all columns for that ministry must be filled in or you will receive no credit. Total all of the hours from above here:

If you have not written a brief testimony on how you received Jesus, write it here:

I recognize the estimate above by this student as reasonably accurate and I recommend this person listed above as a future student at Summit Bible College.

Signature of Your Pastoral/Ministry Leader:

Date:

Phone Number of Pastoral/Ministry Leader: