Minnesota Graduate School of Theology Associate School Programs

MINISTRY CHOICE FORM

Each student enrolled in the Minnesota Graduate School of Theology ("MGST") is required to complete 24 hours of outside ministry per semester. Check below the ministry in which you will be involved and return this form to your advisor/instructor. You must continue with the chosen ministry for the remainder of the semester and, at the end of the semester, be required to turn in a brief summary of the ministry and hours served.

| Student Information | | | | |
|---|----------------|----------|---|--|
| Student Name | E-Mail Address | | (| |
| Street Address | | | Cell Number | |
| City | State | Zip Code | Advisor Name | |
| Degree Program | | | Today's Date | |
| Ministry Choice Information | | | | |
| Evangelism: ☐ Jail and prison ministry ☐ Nursing homes ministry ☐ Mission ministry ☐ Street ministry ☐ Tract ministry ☐ Witnessing ☐ Other | 1 | | Helps: ☐ Ushering ☐ Greeting ☐ Building preparation and cleaning up ☐ Sound equipment ☐ Book and tape ministry ☐ Other | |
| Children's ministry: ☐ Sunday school ☐ Special programs ☐ Nursery and child care ☐ Other | | | Church staff: ☐ Youth ministry ☐ Assistant pastor ☐ Senior pastor ☐ Other | |
| Counseling: ☐ Personal counseling ☐ Internship ☐ Other | | | Music ministry: ☐ Special music ☐ Band or orchestra ☐ Choir or song leading ☐ Other | |

If you are currently involved in or would like to be involved in a ministry not listed above, please contact the MGST main office at (763) 560-9610.

If you will be using one of the ministry selections listed on this form to fulfill the requirements for an internship, please complete the below.

<u>Length of internship</u>. An internship requires 9 months to complete and represents a total credit of 10 hours or 10 credits. The student must commit to no less than 10 hours of monthly participation under the supervision of a pastor, another church-appointed leader, or a parachurch ministry leader in order to meet the minimum requirement for the internship. MGST recommends that the student consider giving more time to the ministry of choice but the minimum requirement will be accepted.

Internship grading. The grade for the internship will be assigned by the student's supervisor.

Assigned internship supervisor. The student must first select the ministry in which (s)he intends to participate. Next, the student should select the supervisor that will be assisting him/her during this 9-month period. (If the organization assigns a supervisor rather than the student being allowed to select, MGST accepts the organization's recommendation.) The supervisor must assist the student in completing this portion of the form. (S)he will be given two support forms to be used in grading the student's progress. The student should be given the internship assessment agreement form to share with the supervisor for his/her completion.

<u>Additional information</u>. Additional instructions will be given to the student after MGST has received the request for consideration of a ministry internship choice if needed only.

Please check the following if you wish to be considered for internship in your ministry choice:

| ☐ I would like to apply for an internship.☐ I would like the forms for supervision sent to me. | | | | | |
|---|---|--------------------------------------|--|--|--|
| | | | | | |
| ☐ I would lik | e to select a ministry other tha | n those listed on this form such as: | | | |
| | 1 × 2 × 2 × 2 × 2 × 2 × 2 × 2 × 2 × 2 × | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Supervisor Inf | ormation | | | |
| St. | | | | | |
| | 700000000000000000000000000000000000000 | | | | |
| Supervisor Name | | Position in Church or Ministry | | | |
| | | _ () | | | |
| Organization Name | | Office Phone Number | | | |
| | | _ () | | | |
| Street Address of Sup | ervisor | Cell Phone Number | | | |
| | | | | | |
| City | State Zip Code | E-Mail Address | | | |
| Today's Date | | | | | |