After discussing with your FE Supervisor, type your answers directly on this form in order to be approved by the Director of Field Education.

1. **Overview of your Field Education Experience:**

|  |  |
| --- | --- |
| 1.1 | Describe your ministry responsibilities. |
|       |
| 1.2 | Will this be a paid position or volunteer work? |
|       |
| 1.3 | What is the time frame to complete the 400 required hours? |
|       |
| 1.4 | What are the days and hours the student is expected to work? |
|       |
| 1.5 | What days/times will you meet with your supervisor each week/month (minimum of 40 hours required) in order to get encouragement, guidance, feedback? |
|       |
| 1.6 | What books, articles, etc. will you and your Supervisor read and discuss? |
|       |
| 1.7 | What conferences, seminars, etc. will you attend with your Supervisor? |
|       |

1. **Learning Objectives:**

|  |  |
| --- | --- |
| 2.1 | The Student will receive ministry experience in the following areas (mark all that apply): |
|  | [ ] Preaching (in a corporate worship service)[ ] Teaching[ ] Facilitating a Small Group[ ] Mentoring a younger man[ ] Planning and Assisting in Worship[ ] Children or Youth Events[ ] Observation of Meetings (Elder, Deacon, Staff, etc.)[ ] Officer Training[ ] Hospital Visitation[ ] Shut-In Visitation[ ] Bereavement Visitation[ ] Wedding Planning[ ] Funeral Planning[ ] Counseling[ ] Other (please describe below): |
|  |  |
|  |       |
| 2.2 | Describe in detail the ministry knowledge that you expect to gain. |
|       |
| 2.3 | Describe in detail the pastoral skills you want to develop. |
|       |
| 2.4 | Describe in detail the spiritual growth you desire. |
|       |
| Student’s Signature: |  | Date: |  |
| Supervisor’s Signature: |  | Date: |  |
| Director of Field Education’s Signature: |  |
| Date Approved: |  |