**Admission to Candidacy**

**For approval by D.Min Committee**

**Registration Services**

847.866.3905 | registrar@garrett.edu | 2121 Sheridan Road | Evanston, Illinois 60201 | 800.SEMINARY| www.garrett.edu

**After filling out your name, date, and title, please print this form.**

**This form must be signed by both the OSAT and the Faculty Team,**

**and the original with signatures must be given to the DMin Program Coordinator**

**for action by the DMin Committee.**

Name of Participant       Date of Enrollment

Research Project Title

1. Action of the On-Site Advisory Team

The members of the OSAT met on       (date) at       (place) to discuss and evaluate the readiness of the Participant to be admitted to candidacy in the Doctor of Ministry Program. After due consideration of his/her performance in the program and growth in competence in the practice of ministry, the Team voted to recommend him/her for Admission to Candidacy.

Signed      , Advisory Team Chairperson

     , Faculty Adviser or Track Coordinator

1. Action of the Faculty Team

The members of the Faculty Team met on       (date) at       (place) to consider the evidence of this Participant’s performance and progress in the Doctor of Ministry Program. After due consideration of the Participant’s academic capabilities and the project proposal, the Team voted to recommend him/her for Admission to Candidacy.

Signed      , Faculty Adviser

     , Faculty Reader

     , Faculty Reader

C. Action of the DMin Committee

Admission to Candidacy voted by the D.Min. committee on       (date).

Signed      , DMin Program Director

D. Action of Faculty

Admission to Candidacy voted by the Garrett-Evangelical Faculty on       (date).

Signed      , Academic Dean