FIELD EDUCATION INFORMATION BRITE DIVINITY SCHOOL, TCU Box 298130, Fort Worth, TX 76129

Date of application: _						
Name: First	Middle	Last				
Present address: Street / PO Box						
City	State	e & Zip Code				
Phone Number	(
Denominational affilia	tion:					
When do you expect to	arrive in Fort Worth? _					
I. FAMILY						
Married?N	Name of Spouse:					
Names of children:						
Does your spouse desired	e employment?					
If so, for what is he/she	best qualified?					
II. FIELD EDUCATION Indicate your preference	ON PREFERENCE 2: number 1 (1st choice) through 6 ac	ecording to preference				
Student Pas	ent Pastor (Sunday only)Associate or Assistant					
Student Pas	stor (Weekend only)	Christian Education				
Student Pastor (Living in field)		Youth Ministry	Youth Ministry			
Music	Other					
III. EDUCATION AN	D WORK EXPERIENCE					
College or Unive	ersity:					
Major:	Degree:	Date of Graduation:				

College or Universi	ty:				
Major:	De	egree:	D	Pate of Graduation: _	
Work experience:					
ASTORAL EXPER	IENCE			articulars – name of church,	
Give details of <u>othe</u>	er church-relate	ed experien	ce you have had	l :	
List other religious	work experien	ces you fee	l are significant	:	
Relationship to den	omination judi	catory – Li	censes:		
Ordained:					
When:	at are your voc	eive from B	Brite?		
Give names and addresses Professor	of three persons w	no have agreed	to provide reference	s about you and your work.	
Title	First Name]	Last Name	Name of College / Un	iversity
Address Street/B.O. Box		C:t-:	State	Zip Code	Phone Number
Succert.O. Box		City	State	Zip Code	r none muniber
Minister	First Name		Last Now -	Character / Construction	
	First Name]	Last Name	Church / Organization	l
Address Street/P.O. Box		City	State	Zip Code	Phone Number
Layperson			Last Name	-	Thone Ivailiber
Title	First Name	1	Last Name		
Address					
Street/P.O. Box		City	State	Zip Code	Phone Numb

VII. PERSONAL / VOCATIONAL

- Please write a brief autobiographical sketch. We are interested in:

 your family and religious background

 your employment experience, community service, recreational interests

 your interest in preparation for ministry and specific ministerial vocational goals

Recommendations Waiver Form

<u>Important.</u> Under the provisions of the Family Educational Rights and Privacy Act of 1974, you have the right, if you enroll at Brite Divinity School, to review your educational records, including letters of recommendation for admission. The Act further provides that you may waive your right to see recommendations for admission. Please indicate below by checking the appropriate phrase and signing your name whether or not you wish to waive this right. <u>This form must be completed and signed before your application can be distributed to potential job sites.</u>

I waive	any right I may have to the recommendations from my references
I do not w	aive
Note: Your reference recommendation.	ences will be told whether you waive or do not waive your right to access to the
Signature	Date
	age, sign the form and return the form to the Field Education Department of Brite Divinity ve an electronic signature, please attach it to this form before you submit it online.
Hard copies of thi	is Field Education Application should be returned to:

Director of Field Education Brite Divinity School Texas Christian University TCU Box 298130 Fort Worth, TX 76129