Form 1

ST. STEPHEN'S COLLEGE
DOCTOR OF MINISTRY PROGRAM
Learning Covenant – Guidelines

Student	
Advisor (if student has one)	
Start Date of Program	
Date	
Co-requisites (if any)	

Ministry Context: Provide a brief description of your ministry context. Indicate your understanding of ministry and the ways in which you engage in ministry. Be concise.

Academic Interest: Provide a brief and concise description of your academic interest. State briefly the question that calls to you, why it is important and how it arises from your experience of ministry and/or your own faith journey.

DMin Learning Goals: Specify your particular learning objectives for advancing your personal, professional and theological integration in relation to achieving a higher level of competence in the practice of ministry.

Plan to Realize Learning Goals:
   a. **Prerequisites / Corequisites:** List any prerequisites or corequisites necessary for completion of the DMin program.

   b. **Integrative Seminars (IS) and Online Learning Community (OLC):** Based on your experience thus far, make a brief reference to the IS and OLC and how you might see them serving your learning goals.

   c. **Foundational Courses:** For each of the Foundation Course areas provide a course title and intended area of study along with a brief indication of how the course will support your learning goals and academic focus.

Core Program	Specialization in Supervisory Education
1) Religious/Spiritual/Theological Foundations	1) Foundations for Supervisory/Adult Learning
2) Student's Focus of Expertise	2) Foundational Practicum: 1st Provisional Unit
3) Methodologies for Knowledge Generation	3) Methodologies for Knowledge Generation

   d. **Personal and Spiritual Growth**: Include self-care strategies for heightened awareness and integration of personal and spiritual growth during the DMin program. Describe both ongoing and new strategies including mentors and peer support.

   e. **DMin Community in Support of Your Learning:** Identify the community that supports your learning, who will engage and resource your DMin studies. This list will include at least fellow students and members of your ministry context. What expectations do you have of yourself and these individuals/communities? State how you see these individuals/ communities supporting your learning goals?

   f. **Schedule Plan:** Complete the schedule plan of DMin requirements and dates.

   g. **Additional Plans**: If you wish, provide any other ways you intend to meet your learning goals and enrich the learning opportunity of the DMin program.

ST. STEPHEN'S COLLEGE
DOCTOR OF MINISTRY PROGRAM
Learning Covenant Approval Form

Student	
Advisor (if student has one)	
Start Date of Program	
Date	

Corequisites (if applicable)

	Corequisite 1	Date:	
	Corequisite 2	Date:	
	Corequisite 3	Date:	
	Corequisite 4	Date:	

Inquiry, Research and Evaluation

	Inquiry, Research and Evaluation	Date:	

Integrative Seminars (IS)

	DMin Integrative Seminar 1	Date:	
	DMin Integrative Seminar 2	Date:	
	DMin Integrative Seminar 3	Date:	

Online Collegiums (OLC)

	OLC 1 (2 years)	Date:		Date:	
	OLC 2 (2 years)	Date:		Date:	

Foundational Courses

Core Program		Specialization in Supervisory Education	
	Course Name/Focus:		Course Name/Focus:
1) Religious/Spiritual/ Theological Foundations		1) Foundations for Supervisory/ Adult Learning	
2) Student's Focus of Expertise		2) Foundational Practicum: 1st Provisional Unit	
3) Methodologies for Knowledge Generation		3) Methodologies for Knowledge Generation	

Program Concentration

Core Program

	Project Vision	Date:	
	Integrative Paper		
	Begun	Date:	
	Approved	Date:	

Specialization in Supervisory Education

	Completed Program Approval, part 1	Date:	
	Completed 2nd Provisional Unit	Date:	
	Completed CASC/ACSS Learning Module	Date:	
	Participation in Supervisory Peer Group	Date:	
	Completed Program Approval, part 2	Date:	
	Certification as CASC/ACSS Supervisor-Educator	Date:	
	Completed Post-Certification Mentoring Course	Date:	

Proposal

	Begun	Date:	
	Approved	Date:	

Design and Ethics Approval

	Begun	Date:	
	Approved	Date:	

Pilot Project

	Project completed	Date:	

(Research) Project

	Begun	Date:	
	First Analysis/Product Draft Submitted	Date:	
	Final Analysis/Product Draft Submitted	Date:	

Dissertation

	Begun	Date:	
	First Draft Submitted	Date:	
	Final Draft Submitted	Date:	

Convocation

	Projected graduation	Date:	

Student Signature	Advisor Signature (if student has Advisor)	Department Chair Signature
Date	**Date**	**Date**

Student Forward to Department Chair