

DOCTORATE OF MINISTRY (D.Min.)

LETTER OF SUPPORT

This sheet must be added to the letter of support.

Candidates for the Doctor of Ministry are rooted in a faith community willing to support them through their programme of studies. We request a letter from a supervisor in the applicant's ministry context indicating support for his or her studies and an appreciation for the need for stable placement, insofar as possible, for the duration of the program.

Name of Applicant: _____

Address of Applicant: _____

Email address of the Applicant: _____

Name of Respondent (please print): _____

Address of Respondent: _____

Phone:

Home number: (____) _____

Office number: (____) _____

Profession/Function: _____

For how many years/months have you been the candidate's supervisor? _____

As supervisor in the applicant's ministry context,

1) I hereby indicate my support for his / her studies: _____ (initials)

2) I understand the need for stable placement, insofar as possible, for the duration of the program:
_____ (initials)

See letter.

Date : _____

Signature : _____

RETURN TO:

Office of the Registrar
Saint Paul University
223 Main Street
Ottawa ON
K1S 1C4 CANADA