

BIBLE PRACTICUM CONTRACT

Student Signature

Date

Ministry involved with during this time

Phone number

Why did you choose this ministry?

This portion to be completed by the Supervisor

Supervisor Signature

Position

Church/Organization

Address

Home Phone:

Work:

This portion to be completed by a parent

Parent Signature

Date

Phone:

Contract Approved By:

Practicum Advisor

Date

***This completed contract must be turned in to the Practicum
Advisor before ministry can begin!***