



Exploring Differences, Deepening Faith

D.MIN. PROJECT PROPOSAL EXAM SCHEDULING FORM

Student Name: _____ Date Submitted: _____

Email: _____

Project Title: _____

Advisor: _____

Three dates/times at which both student and advisor are available (*Exam is typically 90 minutes.*):

- 1. _____
- 2. _____
- 3. _____

Two Additional Readers Requested:

Reader Approved by Dean:

- 1. _____
- 2. _____

- _____
- _____

Office Approval Needed:

Signature Required:

Advisor: Advisor agrees that the student is ready for exam.

Registrar: All outstanding grades have been recorded and course requirements have been met.

Dean of Seminary: Exam is approved to take place.

Room booking has been made for: _____

Student, Reader, and Advisor have been notified of confirmed date: _____

*****Please return this form to the Dean's Executive Assistant with your exam copies once you have obtained signatures from your Advisor, and the Registrar. Thank you.***