

St Michaels Christian University 6124 NW 19th Court - Margate, FL 33063 Tel: (800) 420-3698 - Email: <u>info@stmichaelscu.org</u>

MINISTRY - CHRISTIAN SERVICE PRACTICUM LOG

IMPORANT: Please PRINT or TYPE, except for boxes marked signature. This form is required of all undergraduate students who take courses for college credit. It ensures that a student receives proper credit for fulfilling his/her obligation to serve a minimum of 72 hours per year in the ministry of the church he/she attends. It is the student's responsibility to ensure that this form is completed and submitted to the Administrator no later than one (1) month before that year's graduation. Fill out one (1) line of section #3 per job performed. Use multiple sheets, if necessary. Please keep a photocopy of the completed form for your records.

PERSONAL INFORMATION

Name					
Date	Student IDStudent Level				
CHURCH INFO	RMATION				
Church Name					
Address					
		te			
Senior Pastor Nam	mePhone				
SERVICE RECO	RDS				
Type of Ministry_		S	upervisor Signatu	re	
Start Date	Stop Date	Hours Worked	Superviso	r Name	
Type of Ministry	Supervisor Signature				
Start Date	Stop Date	Hours Worked	Superviso	r Name	
Type of Ministry	Supervisor Signature				
Start Date	Stop Date	Hours Worked	Superviso	r Name	
M. C' AN					

Your Signature Attests That the Student Performed His/her Assigned Tasks in A Faithful & Satisfactory Manner

Electronic Signature Agreement. By signing your name, you are signing this Agreement electronically. You agree your electronic signature is the legal equivalent of your manual signature on this Agreement. By signing you consent to be legally bound by this Agreement's terms and conditions. You also agree that no certification authority or other third party verification is necessary to validate your E-Signature and that the lack of such certification or third party verification will not in any way affect the enforceability of your E-Signature or any resulting contract between you and St Michaels Christian University.