## Diaconal Ministry Field Education Information Form

Date:	
Name:	
Address	
Email	Phone
Home Synod:	
Area of specialization	
Advisor:	
Entrance Decision (date): _	
Endorsement Decision (date (please indicate a future "pending" date in	e):
	ormation Event:
	Date
I plan to attend the Fo	ormation Event, January of
<u> </u>	tual Direction to fulfill the Diaconal Ministry
I will begin Spiritual D	Direction (date)
I have spoken to the Co field work site and congreg	ontextual Education Department regarding ational component.