REQUEST FOR ADMISSION TO LAY PASTOR TRACK
SOUTH CAROLINA LAY SCHOOL OF THEOLOGY

NAME of Candidate _____ Home Phone_____

Address _____ Cell Phone_____

_____ E-mail _____

Church _____ Presbytery _____

Service to church, presbytery:

_____
_____
_____
_____

ENDORSEMENT of SESSION

NAME of Candidate _____

Church _____

Date of endorsement _____

_____ _____
Signature of Clerk of Session Signature of Pastor

ENDORSEMENT of COMMISSION/COMMITTEE ON MINISTRY

NAME of Candidate _____

Church _____ Presbytery _____

Date of endorsement _____

_____ _____
Signature of COM Moderator Signature of Executive Presbyter

Upon completion, send a copy to

Janis K. Blocker, registrar
Lay School of Theology
20238 Augusta Hwy
Round O, SC 29474
dajaview@lowcountry.com
843-835-2173; 843-893-6994