



**DOCTORATE OF MINISTRY (D.Min.)**

**LETTER OF SUPPORT**

This sheet must be added to the letter of support.

Candidates for the Doctor of Ministry are rooted in a faith community willing to support them through their programme of studies. We request a letter from a supervisor in the applicant's ministry context indicating support for his or her studies and an appreciation for the need for stable placement, insofar as possible, for the duration of the program.

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Email address of the Applicant: \_\_\_\_\_

Name of Respondent (please print): \_\_\_\_\_

Address of Respondent: \_\_\_\_\_

Phone:

Home number: (\_\_\_\_) \_\_\_\_\_

Office number: (\_\_\_\_) \_\_\_\_\_

Profession/Function: \_\_\_\_\_

For how many years/months have you been the candidate's supervisor? \_\_\_\_\_

