## REQUEST FOR CREDIT CHRIST SERVANT MINISTRIES

## Eastern Pennsylvania Conference of the United Methodist Church

Complete this form if you feel that you have participated in a course of study or training that has helped develop your knowledge, skills, and competencies as a servant leader and should be approved for credit. Additionally, you feel the study or training meets one of the following descriptions:

- The course is on the Conference/District Approved Course list -- or is a GBOD or BOOM approved course -- but credit has not been assigned. (Complete sections 1 & 2)
- The course is *not* listed as a CSM, GBOD, or BOOM approved course -- but you feel that consideration should be given. (Complete sections 1, 2, & 3)

If your course/training meets one of the above descriptions, submit a completed form (as described above) along with appropriate documentation to the CSM Conference Director, a CSM District Director, or a member of the CSM Certification work team.

After this form has been received and reviewed, a copy will be sent to you and can be attached to you annual report to your Charge Conference.

Last Name	First Name	Telephone
Mailing Address		
Local Church		
	on (for which c	redit/certification is being reques
		D ( ) 0
Name of course, program or even	t	Date(s) of course, event or progra
Name of course, program or even School or sponsoring organization		Date(s) of course, event or progra
School or sponsoring organization	1 2	
School or sponsoring organization  Number of contact hours*  is course appears on the	n /	Address of school/sponsoring organization
School or sponsoring organization  Number of contact hours*  is course appears on the	ved Advanced	Address of school/sponsoring organization  Training and/or Courses

If you have checked one of the above categories sign and date the 2nd page of this form and send both pages to the Conference Director, a District Director, or a member of the CSM work team.

<sup>\*</sup>A Contact Hour is defined as a 50-minute classroom, seminar session or equivalent.

## (Complete this section... if the course does not appear on one of the approved CSM, GBOD, or BOOM approved course listings)

## Section 3: Course Description and/or Syllabus

a. Provide a description of the course/event and/or submit a syllabus or printed information that thoroughly describes the training. Be sure your description has enough information to determine that this request is for training that maintains, upgrades or updates skills that are needed by servant leaders and that the emphasis is on caring, communicating, leading, or a combination of these core CSM themes. (Use extra sheets if necessary.)

b. State how you believe this course/event relates to your ministry as a Servant Minister.  (Use extra sheets if necessary.)			
Signature of Christ Servant Minister	Date		
(for CSM Work Team use)			
This application/report has been reviewed of Eastern Pennsylvania Conference			
Approved Credit Assigned	Disapproved		
Date Signature of	CSM District/Conference/Representative		