

OFFICIAL STAFF USE ONLY: PATP # _____ Processed by _____ Date ____/____/____

FORM 15-Pastor's Advanced Training Program Admission Form

(A member of the Education and Leadership Ministries, National Council of Churches)
As authorized by the Division of Christian Education Accreditation and Credentials
of the Sunday School Publishing Board, National Baptist Convention, USA, Inc.

Submit form to: Division of Christian Education ~ P . O. Box 70990 ~ Nashville, TN, 37207-0990

Check your position and submit the required documentation:

- ☐ **PATC Graduate:** Copy of PATC certificate
- ☐ **Pastors/Ministers:** Letter of verification from church secretary; copy of Certificate of Progress Phase 1 certificate; copy of course cards for 2023, *Creative Way of Teaching* and 9008, *Public Speaking* or copy of transcript evaluation
- ☐ **Assistant/associate Pastors/Ministers:** Letter of recommendation from your Pastor; copy of Certificate of Progress Phase 1 certificate; copy of course cards for 2023, *Creative Way of Teaching* and 9008, *Public Speaking* or copy of transcript evaluation

Personal Information: Name: _____

Address: _____ City _____ State _____ Zip Code _____

Email Address: _____

Phone: Home (____) _____ Daytime (____) _____ Cell (____) _____

Name of Church: _____

Address _____ City _____ State _____ Zip Code _____

District Association

State Convention

National Convention _____ NBC, USA, Inc. Other (List _____)

Pastoral Experience: Church _____ Position Held: _____

Church _____ Position Held: _____

How did you become aware of this Program? _____

Is your subscription to the Christian Education *Informer* journal current? Yes, ____ No ____ If no, submit a subscription application with this form along with fees.

I hereby apply for admission into the Pastor's Advanced Training Program and will submit in a timely manner all materials needed to complete the phase requirements.

Signed _____ Date ____/____/____
Applicant's Signature

Applicant complete this financial section: Appropriate fees must accompany this form. *Do not send cash! Do not staple or tape checks!*

Contact any certified dean or DCEAC for the current fee structure.

Fees included: Application \$ _____ *Informer* \$ _____ Total \$ _____

Please list the method of payment for this application. Make checks payable to: The Division of Christian Education

Check No. _____ Money Order No. _____ Cashier Check No. _____

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