

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

FORM 15—Application for the Pastor’s Advanced Training Program

(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.

Check your position and submit 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 Courses 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 Courses 2023 “Creative Way of Teaching” and 9008 “Public Speaking,” or copy of transcript evaluation.

Personal Information: Name: _____

Address: _____ City _____ State _____ Zip Code _____

E-mail 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 current fee structure.

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

Please list 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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