

# METHODIST THEOLOGICAL SCHOOL

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## IN OHIO

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### Office of the Registrar

### Declaration of Specialization in the Master of Divinity Degree

Students who wish to pursue a specialization in the M.Div. program must have a conference with the faculty member responsible for that specialization, as listed below. This conference should take place prior to registering for the third course of the four courses that will comprise the specialization. Substitutions for specialization requirements must meet with the approval of the student's academic advisor, advisor for specialization (listed below), and the Academic Dean.

Name \_\_\_\_\_ Date \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Campus Box # \_\_\_\_\_

Degree \_\_\_\_\_ Anticipated Graduation Month/Year \_\_\_\_\_

I would like to declare a specialization in: (check one)

- |                                                       | <b>Contact:</b>       |
|-------------------------------------------------------|-----------------------|
| <input type="checkbox"/> Addiction Ministry           | Vergel Lattimore      |
| <input type="checkbox"/> Biblical Languages and Texts | Lee Johnson           |
| <input type="checkbox"/> Christian Education          | Randy Litchfield      |
| <input type="checkbox"/> Church Leadership            | Lisa Withrow          |
| <input type="checkbox"/> Liturgical Arts              | Robin Knowles Wallace |
| <input type="checkbox"/> Mission & Evangelism         | Joon-Sik Park         |
| <input type="checkbox"/> Pastoral Care & Counseling   | Fulgence Nyengele     |
| <input type="checkbox"/> Spirituality                 | Judy Craig            |
| <input type="checkbox"/> Youth Ministry               | Tim VanMeter          |

I have already completed the following course(s) in the specialization:

\_\_\_\_\_

I agree to complete the requirements, including the integrative project, as stated in the MTSO catalog.

Student \_\_\_\_\_ Date \_\_\_\_\_

Advisor \_\_\_\_\_ Date \_\_\_\_\_

Advisor for Specialization (see above) \_\_\_\_\_ Date \_\_\_\_\_