

2020 WJ LICENSING SCHOOL SIGNATURE AND FEES FORM

Send completed form and all fees to Western Jurisdiction Course of Study,
1325 N. College Ave., Claremont CA 91711-3199 c/o Faith J. Conklin.

Personal Information

Last Name: _____ First Name: _____ MI: _____

Address: _____

Home Phone: (____) _____ (Street or PO Box) (City) (State) (zip)
Work Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____

Have you completed the online registration from at localpastors.org? Yes ___ No ___.

Are you a certified Candidate for Ministry in the United Methodist Church? Yes ___ No ___.

United Methodist Church Information and Signature of DS

Your Conference: _____ District: _____

To your District Superintendent: This applicant has my approval to attend the Western Jurisdiction Licensing School, 2020.

District Superintendent's Signature

Date

DS Name (Please print)

Email

Phone #

Fax #

Community Covenant

As Christians we share in a covenant with one another. As pastors, students and faculty of the Western Jurisdiction Licensing School we recommit ourselves to acting in ways that make visible that covenant. We seek to exemplify Jesus' teachings and love in all we do.

During this time of learning together as a particular sign of that covenant we agree to these

practices: We will treat all persons with dignity and respect.

- We will not use or permit to be used words or actions that deny the worth of others for any reason and especially because of their race, color, nationality, language, physical or mental ability, gender, age or sexual orientation.
- We will not allow or ignore instances of injustice, harassment or mistreat of another.

- We will not plagiarize
- We will not use work that is written by or copied from another person. We will not submit another's work as our own.
- We will not use material from a book, the Internet, or another person without giving proper credit to the author/source.
- By my signature below, I agree to the above stated covenant.

Student's Signature

Date

Fees and Payment

Fee of \$900 for **Licensing School**.....

Total Payment Enclosed: _____

TUITION MUST BE PAID IN FULL BY JUNE 29TH OR YOU WILL NOT BE ALLOWED TO PARTICIPATE.

Please make checks payable to Western Jurisdiction Course of Study

Checks Only

Our new WEB-SITE: localpastors.org

For additional information please call or e-mail us:

Rev. Dr. Faith J. Conklin, Director 760-443-9664 fconklin@cst.edu

Ms. Judy Little, Assistant 909-447-2521 jlittle@cst.edu

Rev. Beth Rambikur, Dean of Licensing School wjlicensingsschool@gmail.com

Our address is:

WESTERN JURISDICTION COS/LICENSING SCHOOL

CLAREMONT SCHOOL OF THEOLOGY

1325 N. COLLEGE AVENUE CLAREMONT, CA 91711-3199