

**PACIFIC SCHOOL OF RELIGION
DOCTOR OF MINISTRY
CANDIDATE PROGRESS REPORT FORM**

(submitted each semester by the student after the Integrative Review, including semesters of Supervision)

D.Min Candidate Name _____

Address _____

Phone _____ EMail _____

Date: _____ Year in program _____

Faculty Advisor _____

1. Number and kinds of contact I have made with advisor this semester: _____

2. I am following my Integrative Review timeline and I project the date for finishing will be:

OR I am not on time because:

and now expect to finish by: _____.

3. Further resources or issues for which I would appreciate help are:

4. Please address the functioning of your local support committee and/or collegial support network:

**Return form to Director of Academic Advisement.
This form will be shared with your advisor.**