

Counselor Application Form



Name:

Sex:

GPA:

Year Completed:

Major:

Minor:

Concentration:

Campus Box:

Current Phone:

E-mail:

Permanent Phone:

Permanent Address:

Parent Name(s):

List two theology professors who could serve as references:

Please answer the following: (Use a separate sheet of paper)

1. What gifts and talents would you bring to this position?
2. What interest do you have in youth ministry or other forms of ministry after graduation?
3. What theology courses you have taken?
4. What goals would you strive to meet as a YTM Counselor?

Applicant's Signature: Date:

Please submit completed applications to:

Jeff Kaster, Youth in Theology and Ministry Director
Saint John's School of Theology-Seminary
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