



COURSE EVALUATION FOR EDS DOCTOR OF MINISTRY CANDIDATES

(Required of EDS Faculty; Requested of other BTI Faculty; Completed form to be given to EDS Registrar)

NOTE: It is the **responsibility of the student** to provide this form for the professor.

Student's Name _____
(first name) (middle) (last name)

Course Name/Number: _____ Date of Birth: _____ Semester: _____ Year: _____

1. Did the student demonstrate an advanced understanding of the nature and purposes of ministry? Yes No

Please comment:

2. As appropriate to the course, did the student demonstrate an enhanced competency in pastoral analysis and ministerial skills, including an understanding of commitment to anti-racism and multiculturalism? Yes No

Please comment:

3. Did the student integrate these dimensions into the theologically reflective practice in ministry? Yes No

Please comment:

4. Did the student give evidence of his/her ability to undertake a DMin thesis/project? Yes No

Please comment:

5. Did the student relate this work with her/his thesis/project? Yes No

Please comment:

Grade for course: _____

Please make additional evaluative comments on reverse.

Faculty Signature _____ Date _____