

Office of the Registrar 4500 Massachusetts Avenue, NW • Washington, DC 20016 PHONE 202-885-8650

EMAIL registrar@wesleyseminary.edu

PROGRAM SPECIALIZATION DECLARATION

Instructions to JOIN a program specialization:

- 1. Meet with the Director of the specific program to discuss requirements and obtain approval signature on this form (requirements are found online).
- 2. Return completed form to the Office of the Registrar.
- 3. The Registrar may assign a new advisor within the program.

Instructions to LEAVE a program specialization:

- 1. Meet with the Director of the specific program and inform them that you are withdrawing from the specialization.
- 2. Return completed form to the Office of the Registrar.
- 3. The Registrar may assign a new advisor within the program.

Last Name							First Name													
												1				/				
Wesley ID #							Date of Birth (mm/dd/yyyy)													
 □ I wish to join the following specialization: I have completed (MDiv = 27 hours, MTS = 20 hours, MA = 12 hours). □ African American Church Studies □ Community Engagement □ Public Theology □ Urban Ministry 											plete	ed n	o r	more	e tha	an a	third	of m	y de(gree
☐ I wish to withdraw from the following specialization ☐ African American Church Studies ☐ Community Engagement ☐ Public Theology ☐ Urban Ministry										on.										
Student Signature														D	ate					
Dire	ector S	ignat	ure										_	D	ate					