



The ARIZONA CONFERENCE CORPORATION of SEVENTH-DAY ADVENTISTS®



13405 N Scottsdale Rd, Scottsdale AZ 85254 PO Box 12340 Scottsdale AZ 85267 (480) 991-6777

ADVANCED DEGREE TRAVEL FORM

Please submit travel form to the office of the Executive Secretary at least 4 weeks before taking class.

Name: _____ Date: _____

Church/Department: _____

Who will cover during absence? _____

Degree pursued:

- _____ Masters in Pastoral Ministry
- _____ Doctor of Ministry
- _____ Other, please explain: _____

Class/Other: _____

Location: _____

(University/Facility)

(City, State)

Departure Date: _____ Return Date: _____

These dates do not conflict with any other conference event (i.e. Pastors' Meeting, Camp Meeting, or any other previously scheduled meeting with conference leadership).

In case of emergency:

Name: _____

Contact Information: _____

FOR ADMINISTRATIVE USE

Approved

Not Approved

Administrative Officer

Date

Comments: _____