ADVANCING MY LEADERSHIP

A Seminar for the application of Bowen Family Systems Theory in the arenas of family, faith, workplace and society.

Application

Please save or print this form and complete. Email the completed application to Dr. Kenton T. Derstine at derstine@emu.edu or mail to **Dr. Kenton T. Derstine, Eastern Mennonite Seminary, 1200 Park Road, Harrisonburg, VA 22802.** If you require more space, please add additional sheets.

General Information

Full Name: _____

Home Address: _____

Email Address: _____

Telephone: (home) _____(mobile:) _____

Current Professional/Volunteer? Position(s): _____

_____

Employer Name and Address: (if unemployed/retired provide most recent position) _____

_____

_____

Professional and Educational Background

Please attach a brief resume listing positions (including dates, location and a short description) held since completing college, most recent first. Please include your educational background. List college, university, or any other educational institution attended and degree(s) conferred with dates of study.

Are you currently working on an academic or professional degree? If so, give university, area of specialization, degree to be earned, and expected date of graduation.

_____

In addition to training from degree-conferring institutions, what professional training have you had?
Name of Institution | Location | Course | From Mo/Yr to Mo/Yr:

_____

_____

_____

Personal Data

Date of Birth: _____ Place of Birth: _____
Marital Status: _____ Name and Age of Spouse: _____
Date(s) of Marriage(s): _____ Date(s) of Divorce(s): _____
Date of Loss of Spouse(s): _____

Children (List from oldest to youngest):
Full Name of Child: _____ Age: _____
Education: _____
With whom does this child live? _____
General Functioning of Child: _____

Full Name of Child: _____ Age: _____
Education: _____
With whom does this child live? _____
General Functioning of Child: _____

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Education: _____
With whom does this child live? _____
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Education: _____
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General Functioning of Child: _____

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Education: _____
With whom does this child live? _____
General Functioning of Child: _____

Health

How would you describe the current state of your health? (Circle One):
Excellent Good Fair Poor

List any serious illness, physical or emotional, (current or chronic) in yourself, your immediate household, or extended family.

_____

_____

_____

Are you currently in psychotherapy? What is the theoretical orientation of your therapist?

_____

_____

_____

ESSAY QUESTIONS

On separate sheets of paper, please address the following three questions:

1. Give a brief history and description of your family (your parents, your siblings, your grandparents, children) and their functioning. What is your level of contact with your family? …your extended family? How have you tried to deal with challenges in your family?

2. Please describe your previous experiences of studying and applying Bowen theory in your family and/or ministry relationships.

3. What are your goals for participating in this seminar for the study of Bowen Theory?

Signature: _____

Date: _____

Application fee of $100 enclosed: _____

Tuition: $900 Balance due prior to 11/15--first day of seminar unless otherwise negotiated.

QUESTIONS: For more information or questions, please contact the program director, Kenton T. Derstine DMin. at derstine@emu.edu or 540-383-5368