



Master of Theological Studies Paper Review Board Registration

DATE: _____

STUDENT: _____
Last Name First

PHONE:(Day) _____ (Evening) _____

E-MAIL: _____

Check the three (3) areas of theology covered in the paper to be discussed:

- Ecclesiastical History Moral Theology Sacred Scripture
 Spirituality Studies Systematic Theology Word & Worship

Names:

ACADEMIC ADVISOR: _____

FIRST READER: _____

SECOND READER: _____