**BEXLEY SEABURY SEMINARY**

**CPE Credit Request and Approval Form**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student (Cell) Phone**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of CPE Center**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CPE Center Web site (if any):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CPE Supervisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Cost:** \_\_\_\_\_\_\_\_\_\_\_\_

**Applying for:** Summer CPE Fall CPE Spring CPE Extended Unit (dates - )

## Check One:

## I entered Bexley Seabury prior to January 2019 and I am taking CPE as an elective.

## I entered Bexley Seabury in or after January 2019 and CPE is a requirement of my degree.

## Please Initial Below

1. \_\_\_\_\_\_\_\_\_ I have posted a copy of my letter of acceptance from the CPE program on the CPE Ad Canvas site.
2. \_\_\_\_\_\_\_\_\_ I have made an appointment with Prof. Emlyn Ott to discuss my goals for the program.
3. \_\_\_\_\_\_\_\_\_ I will request that by September 15 (summer), Jan 15 (fall), or May 30 (spring or extended), I will be in touch with my CPE Supervisor and post on the CPE Ad Canvas site either a letter stating that I have successfully completed one full unit of CPE or a copy of my Completion of CPE Certificate, AND a copy of my final self-evaluation, AND my supervisor’s final evaluation. I will take responsibility for following up with the supervisor to provide these documents, as necessary.
4. \_\_\_\_\_\_\_\_\_ I will pay to Bexley Seabury tuition for 3 academic credits. Upon completion of CPE, I

 do  do not intend to request reimbursement from the seminary for CPE program tuition and fees.

**Student**

**Signature**: Date:

**Please post this form on the CPEAd Canvas site:**

**Prof. Emlyn Ott (eott@bexleyseabury.edu)**

**Approved to register for CPE credit [ML403]:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

 Emlyn A. Ott

**CPE Completed/grade of CR approved:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

 Emlyn A. Ott