ASHLAND THEOLOGICAL SEMINARY

FIELD EDUCATION OFFICE

FIELD STUDY HOURS LOG

Name: _____

DATE	PURPOSE/ACTIVITY AND LOCATION	DIRECT (Connect w/those served)	INDIRECT (Mtgs, Planning, Prep., etc.)	TOTAL HRS.
				0
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	TOTAL:	0	0	0

Field Mentor Signature: _____ Date: _____

Please submit form via one of the following:

a) BlueQuill Dropbox

a) Email: sicenhou@ashland.edu or jswope@ashland.edu

b) Mail: Field Education Office ● Ashland Theological Seminary ● 910 Center Street ● Ashland, OH 44805