

South Carolina Baptist Congress of Christian Education

Rev.Dr.Marvin O'Neal Hughes,Dean
123 East Laurel Ave
Greenwood, SC 29649
Email: pastormoh@yahoo.com

"Study to shew thyself approved unto God, a workman that needeth not to be ashamed, rightly dividing the word of truth." II Timothy 2:15

District Congress Certification Requirements for School of Methods

The dean should be certified by the South Carolina Baptist Congress of Christian Education or a national body. The dean is responsible for preparing and submitting the School of Methods application packet.

Select courses to be taught using current curriculum of the South Carolina Baptist Congress of Christian Education.

Select certified instructors

If this is a newly organized district congress without a certified dean or instructors or if this is your first time applying for certification through the South Carolina Baptist Congress of Christian Education, contact Dean Hughes for further instructions.

Complete application and forward to Dean Hughes along with a cashier's check made payable to South Carolina Baptist Congress of Christian Education. The processing fee is $125.00. Application packet should be in the dean's possession sixty (60) days before the beginning date of school. (A late fee of $50.00 should be added if the packet will not reach the dean within the sixty required days). Packets received within fifteen (15) days of the beginning of a school will be returned.

Please encourage persons interested in becoming certified instructors and deans to begin working toward certification now. This can be expedited by attending neighboring School of Methods, National Congresses and sessions of our State Congress of Christian Education. In your pursuit, please follow the guideline/requirements as prescribed in our curriculum.

A copy of our Graduation and Certification Requirements is attached.

In His, Service,
Rev. Dr. Marvin O'Neal Hughes
Dean



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Greetings and blessings:

As requested, this is your packet to certify your School of Methods.

Please read and complete as directed so that your certification packet will not be delayed.

Please keep in mind, when selecting courses, a District Congress cannot offer national courses if the dean and instructors are not nationally certified.

When selecting your courses, please use the current curriculum of the South Carolina Baptist Congress of Christian Education. (2022 Curriculum)

Along with your application, attach a copy of each instructor's certificate. (If not available, please contact Dean Hughes for further instructions). In the future this will be required.

Course cards will not be forwarded until the attendance of your Annual Study Session are submitted to me on the attached Official Attendance Form. This should be done no later than ten (10) days after the Study Session. Feel free to duplicate as many copies as needed.

REMEMBER - a student must have completed ten (10) hours of instructions to receive a course card.
Please forward a schedule of your weekly outline in your packet.

Forward a cashier's check in the amount of $125.00 made payable to SCBCCE and mail to Dean Hughes.
God bless you in this worthy endeavor as we strive for excellence in Christian Education.

In His, Service,
Rev. Dr. Marvin O'Neal Hughes
Dean

South Carolina Baptist Congress of Christian Education
Application for District Congress School of Methods Certification

Name of District Congress _____

Address _____

_____

Dates/week of School _____

Dean of Congress _____

Dean's Address _____

Dean's E-Mail Address _____ Telephone _____

President of Congress _____

President's Address _____

President's E-Mail Address _____ Telephone _____

Association _____

Moderator's Address _____

Moderator's E-Mail _____ Telephone _____

Listthecourse number, name of course and instructor

Number & Course: _____

Instructor: _____

Number &Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

Number & Course: _____

Instructor: _____

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For State Congress Use Only

Date received by State Dean _____

Signature _____

Approval Date _____

Reason(s) for return of application _____

_____

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South Carolina Baptist Congress of Christian Education

OFFICIAL ATTENDANCE RECORD

Week of/Dates _____

Name of School _____

Course Number and Name_____

Instructor_____

Secretary, please fill in with instructors information first, yours second, then students. Use the letters "P" for present and "A" for absent. Mark the letter "C" in the last column if student completed (10 hours) of study and the letter "I" if they did not.

******Student's Name and Address*******	*********Church *********	*Mon.*	*Tues.*	*Wed.*	*Thurs.*	*Fri.*	*C/I*

Dean's Signature, date and telephone number: