



Master of Arts in Organizational Leadership
Learning Contract/Application Form
 Development Associates International
 &
 Myanmar Evangelical Graduate School of
 Theology (MEGST)



Please submit this to your local cohort coordinator after completion.

Section 1: Identification

Name:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
--------------	----------------------------------	----------------------------------	----------------------------------

Current Address:	Click or tap here to enter text.
-------------------------	----------------------------------

Nationality:	Click or tap here to enter text.
---------------------	----------------------------------

Country of Birth:	Click or tap here to enter text.
--------------------------	----------------------------------

Date of Birth:	Date	Month	Year

Church Denomination:	Click or tap here to enter text.
-----------------------------	----------------------------------

Gender:	Choose an item.
----------------	-----------------

Email address:	Click or tap here to enter text.	Click or tap here to enter text.
Contact Number:	Click or tap here to enter text.	Click or tap here to enter text.

Language Spoken:

First Language	
Second Language	
Third Language (if any)	
Fourth Language (if any)	

Name of current Church/Business/Department/NGO where you are working:

Name of Church/ Organization/Business/Department	
---	--

Organization Focus: Organization Focus

Section 2: Technology

**Access to
email/internet:**

Choose an item.

Section 3: Highest Academic Qualification details

Degree	Click or tap here to enter text.
Institute Name	Click or tap here to enter text.
Location	Click or tap here to enter text.
Year of completion	Click or tap here to enter text.

Section 4: Leadership Experience / Employment

	Leadership Role or Designation	Organization Name	Duration
1	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
2	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
3	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
4	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
5	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Section 5: Background Information

Please briefly share your testimony describing your life before and after knowing Christ.

Click or tap here to enter text.

Please briefly describe your current job or leadership role:

Click or tap here to enter text.

Please briefly describe, why do you want to participate in DAI's MAOL program?

Click or tap here to enter text.

Section 6: Learning Commitment

To make the most of out of my learning journey, I understand that I must adhere to basic requirements of the program such as attending residency classes, participation in the class discussions/interactions, engaging actively with the course manuals/textbooks, active participations in small learning group, support/respect the fellow cohort members, actively communicate with course facilitators, having a personal mentor, timely payment of fees and adapting/familiarizing to the modern communication technology (emails, MS office, video conference, social media tools, Moodle LMS etc).

Please check one of the following:

☐ I agree

☐ I Disagree

Date: Click or tap here to enter text.

Place: Click or tap here to enter text.