

**Biblical and Theological Studies  
Theology Concentration  
General Theological Studies Emphasis**

Name \_\_\_\_\_  
Student # \_\_\_\_\_ CPO \_\_\_\_\_  
\*Expected Graduation Date: \_\_\_\_\_  
\*Students cannot be awarded  
FINANCIAL AID unless the Expected  
Graduation Date is supplied.

Check mark if this is a Second MA degree at Wheaton Graduate School

**Degree Requirements (36 hrs)**

**Biblical Theology Courses (8)**

\_\_\_\_\_ BITH 638 Old Testament Theology (4)  
\_\_\_\_\_ BITH 648 New Testament Theology (4)  
  8   Total

**Transfer courses or exceptions require  
adviser's initials.**

\_\_\_\_\_

\_\_\_\_\_

**Historical Studies (8 hrs)**

\_\_\_\_\_ BITH 576 History of Christianity to 1900 (4)  
\_\_\_\_\_ BITH 577 World Christianity since the 19<sup>th</sup> Century (4)  
\_\_\_\_\_ BITH 653 Historical Theology: Ancient Church (2)  
\_\_\_\_\_ BITH 654 Historical Theology: Medieval Church (2)  
\_\_\_\_\_ BITH 655 Historical Theology: Reformation (2)  
\_\_\_\_\_ BITH 656 Historical Theology: Contemporary Theo. (2)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Systematic Theology (4 hrs)**

\_\_\_\_\_ BITH 565 Christian Theology (4)  
\_\_\_\_\_ BITH 675 Advanced Systematic Theology (4)

\_\_\_\_\_

\_\_\_\_\_

**Comprehensive Exam**

\_\_\_\_\_ BITH 692 (0) Graduate Comprehensive Exam

Students should register for the comprehensive exam in their  
final fall or spring semester. Comprehensive exams are not  
offered in the summer term and may be repeated only once.  
Adviser's signature required for approval of UG  
courses (8 maximum) taken for graduate credit.

**APPROVED ELECTIVES (16) (only 8 hrs from outside  
Theological Studies Department)**

\_\_\_\_\_ BITH 698 Thesis (4)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Total Hrs (36)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I understand I must complete these requirements  
Within 5 years of beginning the MA program:**

\_\_\_\_\_  
Your signature and date

\_\_\_\_\_  
Adviser signature and date

\_\_\_\_\_  
Registrar's Office Rep signature & date

Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_