

Application for Admission

The following checklist items are required in the application process. All information should be submitted to the Seminary Admissions Office at the address printed at the end of page 2.

<u>Applicant Checklist</u>				
Completed Application with of Application Fee of \$50 (non-rCompleted Pastoral Reference	efundable)			
Personal Testimony of FaithAcademic Transcripts				
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Enrollment Information				
Applying as:	☐ Transfer Student	From:		
			School Name	
Starting Semester: 🗖 Fall 🚨 Spr	ing 🚨 Summer	Year:		
Student Status: 🗖 Full Time 🔲 P	art Time 🔲 Audit	☐ Non-matriculated		
Program:	tudies 🖵 Bachelor	of Theology	ster of Divinity	
☐ Doctor of Ministry	☐ Doctor of	Theology		
<u>Personal Data</u>				
Name:			Date of Birth:	
Last	First	Middle		MM/DD/YYYY
Present Mailing Address:			Chala	
	Street	City	State	Zip
Primary Phone:		Secondary Phone:		
Social Security Number:	Email:			
Gender: □ Male □ Female Ma	arital Status: 🗖 Married	□ Single □ Engaged	☐ Divorced ☐ Separated	l □ Widowed
Spouse's Name:	Date of Bi	rth:		MM/DD/YYYY
		, ,		IVIIVI/UU/TTTT
Citizen of USA: Yes No If N	io, Green Card Number:			
If you are a Naturalized Citizen: Date	:	Country of Origin:		
The U.S. Department of Education requ	uests the following option	nal information on ethnicit	ty:	
☐ American Indian or Alaska Native	☐ Asian		☐ Black or African	American
☐ Hispanic of any race	☐ Native Hawaiian or Other Pacific Islander		☐ Nonresident Alien	
☐ Race and Ethnicity unknown	ace and Ethnicity unknown			
Emergency Contact Name:	Last	First	Phone:	
		11131		

Educational Background				
High School/College/University	Degree	Majo	or	Graduation Date
<u>Church Affiliation</u>				
Church Name:		Denominat	ion:	
Address:Street		City	State	Zip
Pastor:		Phone:		
<u>Current Employment</u>				
Employment Status: 🗖 Employed 🚨 Unemplo	oyed 🔲 Retired			
Company Name:				
Address:Street		City	State	Zip
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Applicant's Statement				
I, Theological Seminary. I promise that if admitted, I Seminary curriculum, promptly meet all financial of the Seminary in the current catalog and handbook	will faithfully and dobligations, and care		the studies as req	uired by the
Signature of Applicant:			Date:	

FAITH THEOLOGICAL SEMINARY

529 Walker Avenue, Baltimore, Maryland 21212 Phone: (410) 323-6211 Fax: (410) 323-6331 Email: Admissions@FaithTheological.org Website: www.FaithTheological.org MM/DD/YYYY