

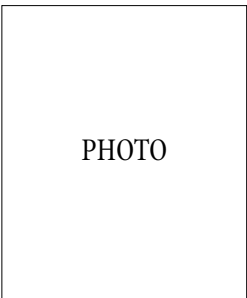


Continental Theological Seminary

APPLICATION FOR ADMISSION For Undergraduate Courses

For Office Use

Date Received _____
Date Fee Paid _____
Identification # _____



I. PERSONAL INFORMATION— Please print legibly (use BLOCK letters).

Name _____
Last First Middle Maiden Name

Present Address _____
E-Mail Address _____

Country _____ Fax Number _____

Daytime Phone _____ Date of Birth _____ Male Female
Day Month Year

Evening Phone _____ Country of Birth _____ Mother Tongue _____

Citizen of _____ Present Visa Status: EU Visa Yes No Student Visa Yes No

Permanent Address _____ Other Visa (Explain) _____
GSM # _____

Country _____

II. EDUCATIONAL PLAN— Application is being made for the following Course

COURSE: (check only ONE below) SPECIALIZATION: (only added to Bachelor's Degree)

Bachelor in Bible and Applied Theology (three years) Christian Education
 Bachelor in Missiological Studies (three years) Music
 Bachelor of Divinity (BDiv - three years)
 Diploma of Higher Education (two years)
 Certificate of Higher Education (one year)

III. ENROLLMENT INFORMATION— Check only ONE in each column.

CLASSIFICATION:	ENROLLMENT DATE:	DESIRED STATUS:	HOUSING PLAN:
<input type="checkbox"/> First Year Applicant	<input type="checkbox"/> Fall (September), 20____	<input type="checkbox"/> Full-time	<input type="checkbox"/> On campus, dorm
<input type="checkbox"/> Transfer Student*	<input type="checkbox"/> Spring (January), 20____	<input type="checkbox"/> Part-time	<input type="checkbox"/> On campus, apartment <i>(married students only)</i>
<input type="checkbox"/> Reapplication to CTS			<input type="checkbox"/> Off campus
<input type="checkbox"/> Special <i>(non-degree)</i>			

* If you are transferring from another institution, please call the Academic Office for special instructions.

How did you become interested in Continental Theological Seminary? If you check more than one item, please circle the person(s) or factor(s) which most influenced your decision to apply to Continental. (If known, please specify the name of the person.)

Current Continental student _____ Pastor _____
 Former Continental student _____ Open Doors _____
 Continental faculty / staff member _____ Youth Convention _____
 Continental student ministry group _____ Parents / Family _____
 Advertisement in _____ Other _____

IV. EDUCATIONAL INFORMATION— *List every high school and every post-high school institution (university) where you completed at least one course.*

SCHOOL	LOCATION	DATE ATTENDED	DEGREE	DATE AWARDED
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

V. CHURCH INFORMATION

Present church you regularly attend

Name of church _____

Specific denominational affiliation of church _____

Name of pastor _____ Are you a member? Yes No

VI. PASTORAL REFERENCE

Please use the Pastoral Reference Form provided with this Application for Admission and have your Pastor return it directly to Continental Theological Seminary.

_____ Address _____
pastor or church official

VII. PERSONAL STATEMENT— *Please TYPE all responses. Limit your total response to all questions in section VII to two TYPED, single-spaced pages. Send with the application.*

1. Ministry Goal, if applicable:

- a. Indicate the kind of ministry you feel God is calling you to fulfill.
- b. How do you expect your studies at CTS to prepare you for this ministry?

2. Describe your previous ministry experience, if applicable.

3. Comment on any relevant medical or psychological history that may help the seminary accommodate your needs as a student.

4. Please respond to the following questions.

- | | | |
|---|------------------------------|-----------------------------|
| Have you ever been separated or divorced? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have you ever been convicted of a crime? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| To the best of your knowledge has your moral behavior ever been called into question? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you now or have you ever been treated for substance or alcohol abuse / addiction? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you now or have you ever used tobacco? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

VIII. PERSONAL AUTOBIOGRAPHY— *TYPE a brief autobiography of no more than two pages using single-spacing (double-spacing between paragraphs). Send with the application.*

Include comments on your commitment to Christ, including when and how you became a Christian, when you were baptized in water, if you feel a call of God on your life for ministry, the significant factors which have aided your growth as a Christian, and the important events and people shaping your identity as a person.

IX. FINANCIAL INFORMATION

Please EXPLAIN FULLY your PLAN to finance your education (include as many details as possible)._____

X. LANGUAGE PROFICIENCY UNDERSTANDING

English is my first language and/or I have previously completed at least one year of previous studies in English.

*If you did **not** check the above box, then please check the following boxes indicating you understand the Language Proficiency policy of CTS.*

I understand that, if English is not my first language or I have not successfully completed at least one year of previous studies in English, then I will be required to take an English proficiency exam/s.

I understand that based on the result of the exam/s, the seminary could require that, along with my studies, I will need to take an English grammar and/or writing course/s that would help improve English writing proficiency.

I understand that in such a case I will be charged an additional fee of 20 euros per course and that at the end of the school year, I will be re-tested to see if my English proficiency has improved enough to return for the next school year.

APPLICATION INSTRUCTIONS

(Check only ONE)

REGULAR STUDENT

1. Complete full Application for Admission.
2. Submit a (non-refundable) fee of 35.00 EURO with this application. *See below for Bank Transfer Information.*
3. Send your (Personal Statement IX) and (Autobiography X) with this application.
 - *Ideally, the Seminary must receive the completed application by 1 September prior to the Fall term for which admission is being sought*
 - *Interviews and campus visits may be desired to clarify certain questions. In such cases, an appointment with the Academic Dean may be necessary. If so desired, please call the Admissions Office to arrange details for such an appointment. Familiarity with the catalog is requested before visiting the seminary.*
 - *A decision regarding admission is normally made within two weeks after all application material is received, including receipt of all transcripts and recommendation forms. You will be notified by mail immediately after a decision has been made.*

SPECIAL STUDENT

- Special students are NOT enrolled in a degree program but have privileges and responsibilities as degree program students.*
1. Complete full Application for Admission.

TRANSFER STUDENT

1. Complete full Application for Admission.
2. Include a statement of explanation and purpose for the proposed transfer.

AGREEMENT

I certify that the information I have provided in my Application for Admission to Continental Theological Seminary is true, complete, and accurate. Further, I am aware of the standards and expectations for student conduct as outlined on page 3 of this catalog. If admitted to Continental, I agree to abide by and support the Community Life Statement.

Signature

Date

IF YOU HAVE ANY QUESTIONS, PLEASE CALL THE ADMISSIONS OFFICE AT +(32) 02/334.85.55 OR E-MAIL US AT: ADMISSIONS@CTSEM.EDU

INTERNATIONAL PAYMENTS

You may be able to arrange with your bank to pay by bank transfer or bank deposit. Our Bank information is:

KBC: Bank

Koning Albertplein 1

B-1600 Sint-Pieters-Leeuw, Belgium

Account No. 426-8125211-81 (Please include your name)

BIC: KREDBEBB

IBAN: BE36-4268 1252 1181

**PLEASE ENCLOSE YOUR 35 EURO APPLICATION FEE
WITH THIS FORM AND MAIL TO:**

CONTINENTAL THEOLOGICAL SEMINARY

ADMISSIONS OFFICE

KASTEELSTRAAT 48

1600 SINT-PIETERS-LEEUW

BELGIUM

ALWAYS PAY IN EURO