



1810 Lutheran Synod Drive
Salisbury, NC 28144

Doctor of Ministry Application

Personal Information

Ms. Mrs. Mr. Rev. Dr. Other

Application Fee Enclosed

Name: Last First Middle

Name on Previous Academic Records, if different Preferred Name

Current Address: Street or P.O. # City State Zip

Phone Home Mobile Number

Email Address _____

Date of Birth: ___/___/___ Country of Birth: _____ Soc. Sec #: _____

Gender: Female Male

Are you a United States citizen? Yes No

Marital Status: Married Single Divorced Widowed

Are you eligible for veteran benefits? Yes No Branch of Service: _____

Do you plan to apply for financial Aid? Yes No

Degree Program Interest (Check one only)

Doctor of Ministry

- General Doctor of Ministry Degree
- Pastoral Theology and Care
- Leadership Ministry
- Community Advocacy and Social Justice Ministry
- Clinical Pastoral Education Supervision

When do you plan to enroll?

Fall Spring

Educational Information

Please list information for all post-secondary institutions attended (beyond high school), including any institution where you are currently enrolled.

Institution	Location (City and State)	Attendance Dates	Date Degree Received	Degree Received	GPA

Are you currently enrolled in another seminary? Yes No

Have you applied or attended Hood Theological Seminary previously? Yes No

Ecclesiastical Information

Denomination or Faith Community: _____

If you are A.M.E. Zion, United Methodist, A.M.E., or C.M.E., what is your annual conference?

Please put year: _____ Licensed; _____ Commissioned; _____ Ordained (Order of Ordination)

_____ Other (specify in the terminology of your tradition): _____

Data regarding your highest clergy credentials: Date: _____ Where? _____

By whom _____ Ecclesiastical Authority: _____

References

Give the name, position and contact information for 3 references below, then ask each reference to fill out the recommendation form and return it to the Office of Admissions, 1810 Lutheran Synod Drive, Salisbury, NC 28144.

Note: Family members cannot be used as references.

Name	Position	Address	City	State	Zip	Phone	Email
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Church (reference #1) _____

Judicatory Official/ Colleague (reference #2) _____

Former Professor/Employer (reference #3) _____

Statement of Purpose

Write a four-page definitive introspective paper describing your spiritual and ministerial journey, and the reason for wanting to obtain a Doctor of Ministry Degree. (Please include from the time of your call, through your career and life seasons, until present)

Background Information

(The following questions relate to the high ethical standards to which those in ministry are held. Failure to provide truthful answers to the following questions or failure to inform the Office of Admissions of any subsequent changes in your answers may result in the revocation of admissions.)

Have you ever been discharged by an employer? Yes No

Have you ever been convicted of a felony, misdemeanor (other than a minor traffic violation), or any incident of sexual misconduct? Yes No

Have you ever been placed on disciplinary probation or been suspended, expelled, or requested/advised to resign from any college, university, professional school or school of theology? Yes No

If you answered yes to any of the above questions, please explain.

Optional Information

We request racial/ethnic information to aid in our statistical reporting to governmental and accrediting agencies. Hood Theological Seminary does not unlawfully discriminate in the administration of its employment, education or admissions policies. We adhere to our own ethos and in compliance with the requirements of Title IX.

Hispanic/ Latino Yes No

Racial and ethnic background Black or African-American White/Caucasian

American Indian or Alaska Native Asian Non-resident alien

Two or more races Native Hawaiian or Pacific Islander Other

Signature

I understand that any falsification of any information given in this application for admission may result in a re-evaluation of my admission to Hood Theological Seminary.

Signature: _____ Date: _____