



1810 Lutheran Synod Drive
Salisbury, NC 28144

Master of Divinity / Master of Theological Studies/Non-Degree Program Application

Personal Information

Ms. Mrs. Mr. Rev. Dr. Other

Name: Last First Middle

Name on Previous Academic Records, if different

Preferred Name

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

Permanent Address (if different): St. or P.O. # City State Zip

Home Phone Mobile Phone Email

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

Ethnicity**: _____ Gender: _____ Profession: _____

Are you a United States citizen? Yes No

Marital Status: Married Single Divorced Widowed

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

Do you plan to apply for financial aid? Yes No

Degree Program Interest (Check one only)

- | |
|--|
| <input type="radio"/> Master of Divinity |
| <input type="radio"/> Master of Theology Studies |
| <input type="radio"/> Biblical Studies |
| <input type="radio"/> History & Theology |
| <input type="radio"/> Non Degree |
| <input type="radio"/> Deacon Studies |

Note: Master of Divinity
Students who have completed 18 hours in the M.Div. program will have the option of declaring up to 2 concentrations in that degree program, fulfilled through the completion of 12 elective hours in the following areas: Biblical Studies, Church History, Theology & Social Ethics, Preaching & Worship, Pastoral Care & Counseling, and/or Christian Education.

When do you plan to enroll?

- Fall Spring Track 1 (Tues., Wed., Thurs.) Track 2 (Weekend)

Campus Location:

- Main Campus Alabama Extension Campus

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) _____

Judiciary Official/ Colleague (reference #2) _____

Former Professor/Employer (reference #3) _____

Statement of Purpose

Write a paper (two page essay) reflecting your faith journey, religious experience, future plans, and the importance to you of an education from Hood Theological Seminary.

(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

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: _____

* The Seminary requests your social security number (SSN) both to maintain the integrity of your academic records and to comply with federal IRS reporting requirements. Your SSN is kept in a secure and confidential location and not released to an outside or third party except in instances permitted by federal law. As an eligible educational institution Hood Theological Seminary must use your SSN to file certain returns with the IRS and to furnish a statement to you. The returns Hood Theological Seminary must file contain information about qualified tuition and related expenses. The Privacy Act Notice - Section 6109 of the Internal Revenue Code – requires you to give your correct SSN to persons who file information returns with the IRS.

** Ethnicity

00- Black or African American

01- White

02- Hispanic/Latino

03- Asian

04- American Indian or Alaska American

05- Native Hawaiian or Pacific Islander

06- Two or more races

07- Race and ethnicity unknown

08- Nonresident alien