

NAZARENE THEOLOGICAL SEMINARY ADMISSIONS APPLICATION CHECKLIST

*All materials must be received before your application will be considered for admission
All applicants will be automatically evaluated for scholarships*

ALL APPLICANTS MUST SUBMIT THE FOLLOWING:

1. A COMPLETED APPLICATION FORM (Fall Deadline July 1; Spring Deadline December 1).
2. A \$25.00 NONREFUNDABLE APPLICATION PROCESSING FEE.
3. PERSONAL STATEMENT. This essay may be used for assessment of your development during your seminary career.
4. OFFICIAL TRANSCRIPTS: Official transcripts detailing previous academic study from all universities or colleges attended, embossed with the school seal, must be sent directly from the issuing institution to the Office of Admissions.
Applicants with course work in progress toward the fulfillment of a degree are required to submit an official final transcript verifying receipt of that degree after completion of the course work.
5. REFERENCES: Applicants should request three letters of recommendation from non-relatives who can provide an adequate and objective assessment. These letters should be sent directly by the recommender designated on the form to the Office of Admissions.
 - Senior Pastor, or your Ecclesial Supervisor if you are the Senior Pastor
 - Professor from undergraduate/graduate studies well acquainted with the applicant's academic qualification.
 - Personal Reference.Applicants are encouraged to submit references from additional clergy, faculty, employers and other mature adults well acquainted.

INTERNATIONAL APPLICANTS MUST ADDITIONALLY SUBMIT:

1. Test of English as a Foreign Language (TOEFL)-International Students Only: Applicants from countries in which a language other than English is spoken will be required to give evidence of proficiency in the English language before being admitted. A minimum TOEFL score of 550 for the paper based test will be the standard for judging this proficiency (computer based scores must exceed 213 and internet based tests must exceed 79). Test scores should be no more than two years old. For information about this test, contact the Educational Testing Service, TOEFL/TSE Services, P.O. Box 6151, Princeton, NJ 08541-6151. The web site is www.toefl.org and the telephone number is (609) 771-7100. This test may be taken on the TOEFL website.
2. FINANCIAL WORKSHEET and all supporting documents to verify sources of support.
3. International students who have transcripts in a language other than English must provide OFFICIAL TRANSCRIPTS ACCOMPANIED BY CERTIFIED ENGLISH TRANSLATIONS.

Upon Acceptance, an I-20 Certificate of Eligibility for Nonimmigrant (F-1) Student Status is mailed and will be received with official letter of acceptance.

SEVIS Fee for F-1 and J-1 Students: Beginning September 1, 2004, a new United States Department of Homeland Security (DHS) rule went into effect. This rule requires F-1 and J-1 visa applicants to pay a one-time fee of \$100 to supplement the administration and maintenance costs of the Student and Exchange Information System (SEVIS). For more information on how to do this visit the US Dept. of State website <http://www.unitedstatesvisas.gov/obtainingvisa/index.html>

SCHOLARSHIPS

Applicants who submit all application materials prior to February 15th (for Fall enrollment) and October 30th (for Spring enrollment) will be given first consideration for scholarships. Students who are ineligible or do not receive a scholarship upon entrance into NTS may apply after their first semester for a General Scholarship.

NTS POLICY OF NONDISCRIMINATION

NTS does not discriminate against applicants on the basis of race, color, national origin, sex, marital status or age. Inquiries concerning the Seminary's nondiscrimination policy may be addressed to: Nazarene Theological Seminary, ATTN: President's Office, 1700 East Meyer Blvd., Kansas City, MO 64131.

APPLICATION FOR ADMISSION

Nazarene Theological Seminary
 1700 East Meyer Boulevard
 Kansas City, MO 64131-1263
 1.800.831.3011 (locally 816.268.5400)
 Fax: 816.268.5500
 Email: enroll@nts.edu

For Office Use Only

Fee: _____
ID#: _____
Approved: _____

Rev. Dr. Mr. Mrs. Ms. Miss

_____ Application Date

Last Name	First Name	Middle/Maiden Name
Permanent Address	Email Address	
City, State, Zip	Fax Number (If available)	
Telephone	Social Security Number	
Mailing Address (if different from above)		
City, State, Zip		
Telephone (Home)	Telephone (Cell)	
Country of Citizenship		

EMERGENCY CONTACT PERSON:

Name
Address
City, State, Zip
Telephone
Relationship to Applicant

Expected Enrollment Date

- Fall Year: _____
- Spring Year: _____
- Summer Year: _____

INTENDED MASTERS PROGRAM

- Master of Divinity
- Christian Education Emphasis
- Intercultural Studies Emphasis
- Urban Ministry Emphasis
- Evangelism Emphasis
- Chaplaincy Emphasis
- Spiritual Formation Emphasis
- Master of Divinity In-Service Program
- Master of Arts in Christian Education
- Master of Arts in Intercultural Studies
- Master of Arts (Theological Studies)
- General Academic
- Research
- Biblical Studies
- Christian Thought and History

OTHER ACADEMIC OFFERINGS

- Certificate Diploma Non-degree

The U.S. Department of Education requests the following information on ethnic origin (check one):

- White, non-Hispanic Black, non-Hispanic Hispanic Asian or Pacific Islander
 American Indian or Alaskan Native Other (specify) _____

How did you hear about NTS? _____

- Professor Current Student Website Conference/Assembly
 Pastor E-Mail/Mailing Graduate Campus Visit/College Fair

I. PERSONAL INFORMATION:

Date of Birth _____ Marital Status _____

Spouse/Fiancé's Name _____

Number and Ages of Children _____

II. ACADEMIC HISTORY: List All Universities, Colleges, Seminaries, and Graduate Schools	Location	Dates		Name of Degree Received	or Number of Credits Earned
		From	To		

Undergraduate Major(s) _____ Graduate Major(s) _____

Have you attended NTS previously? _____ When? _____

Have you been denied admission to any seminary or theological school? _____

If yes, please explain: _____

III. CHURCH AFFILIATION:

Denominational Membership _____

District/Conference _____

Ordained Licensed Lay

If applicable, please note the duration and description of your present and past ministry experiences:

Title of Ministry Position (i.e. pastor, educator, ministry director, chaplain, missionary)	Location	Dates		Volunteer	Staff
		From	To		

IV. REFERENCES: List the names and addresses of those who will be submitting letters of recommendation.

1. _____

Name (Pastor or if a pastor, Ecclesial Supervisor Reference) Title Institution/Company

City, State/Country Telephone Email

2. _____

Name (Professor Reference) Title Institution/Company

City, State/Country Telephone Email

3. _____

Name Title Institution/Company

City, State/Country Telephone Email

V. PERSONAL STATEMENT:

Please attach a 750-1000 word typed essay giving your home and religious background, reasons for desiring to enter a particular aspect of ministry, and reasons for wanting graduate theological education.

If admitted to NTS, I will diligently and faithfully attend the instructions and exercises of this Seminary, observe its rules of conduct relating to students, respect the admonitions of the instructional staff, and cooperate with the spirit and spiritual emphasis of the Seminary.

Signature and Date

2. How long have you known the applicant? _____
How well? Very well Rather well Casually Not well
In what capacity? _____

3. As the applicant’s pastor/ecclesial superior do you have any concerns about her/his readiness to engage in a graduate level program of study? Yes No Unsure
If yes/unsure, please elaborate: _____

4. Do you see this person as someone whom you would hire, have as your pastor/associate pastor, or like to work with as a colleague? Yes No Unsure
If no/unsure, please elaborate: _____

5. How likely is this person to succeed in future ministry contexts?

6. Do you know of any physical, mental or emotional problems that might hinder effective work in Christian ministry? Yes No
If yes, please elaborate: _____

7. The recommendation I give this applicant for admission to Nazarene Theological Seminary
 Highly recommend Recommend
 Recommend with reservations Do not recommend

8. Additional comments (attach letter if desired):

9. Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____
Position: _____
Signature: _____
Date: _____

Return to:
Office of Admissions
Nazarene Theological Seminary
1700 East Meyer Boulevard, Kansas City, Missouri 64131-1263

2. How many courses has this student taken with you? One Several Many

3. How well do you know this student's academic ability?

Very Well Rather well Casually Not well

4. How well did the applicant perform in the classroom setting, in doing research, and in writing?

5. Do you have any concerns about her/his readiness to engage in a graduate level program of study?

Yes No Unsure

If yes/unsure, please elaborate: _____

6. Please rank this student's academic ability in comparison to their departmental class (i.e. within top 5% or top 20%)

7. Has/does this student exhibited any leadership qualities outside of the classroom that you know of?

8. Do you know of any physical, mental or emotional problems that might hinder effective work in Christian ministry? Yes No

If yes, please elaborate: _____

9. The recommendation I give this applicant for admission to Nazarene Theological Seminary.

Highly recommend Recommend
 Recommend with reservations Do not recommend

10. Additional Comments (attach letter if desired):

11. Recommender's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Position: _____

Signature: _____

Date: _____

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2. How long have you known the applicant? _____
How well? Very well Rather well Casually Not well
In what capacity? _____

3. Do you have any concerns about her/his readiness to engage in a graduate level program of study?
 Yes No Unsure
If yes/unsure, please elaborate: _____

4. What is your experience of the applicant's character, interpersonal skills, and ministry effectiveness?

5. What qualities do you affirm in this applicant for future ministry?

6. Do you know of any physical, mental or emotional problems that might hinder effective work in Christian ministry? Yes No
If yes, please elaborate: _____

7. The recommendation I give this applicant for admission to Nazarene Theological Seminary
 Highly recommend Recommend
 Recommend with reservations Do not recommend

8. Additional comments (attach letter if desired):

9. Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____
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