



# NAZARENE THEOLOGICAL SEMINARY ADMISSIONS APPLICATION CHECKLIST

*All materials must be received before your application will be considered for admission*

## APPLICATION DEADLINES:

- **PRIORITY ADMISSION:** March 1 (Summer & Fall Semesters) & October 1 (Spring Semester)
- **REGULAR ADMISSION:** June 15 (Summer & Fall Semesters) & November 1 (Spring Semester)

## A COMPLETED APPLICATION FILE CONSISTS OF THE FOLLOWING:

1. **COMPLETED APPLICATION FORM**
2. **\$25.00 NONREFUNDABLE APPLICATION PROCESSING FEE**
3. **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 from the recommender designated on the reference form to the NTS Office of the Registrar and Admissions.
  - PASTORAL REFERENCE (or Ecclesial Supervisor applicant is the Senior Pastor)
  - ACADEMIC REFERENCE (Undergraduate/graduate professor well acquainted with applicant's academic qualification)
  - PERSONAL REFERENCE

*Applicants are encouraged to submit references from additional clergy, faculty, employers and other mature adults well acquainted with them.*
4. **PERSONAL STATEMENT:** This essay may be used for assessment of your development during your seminary career.
5. **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 NTS Office of the Registrar and 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.

## INTERNATIONAL APPLICATIONS MUST ALSO INCLUDE:

1. **TEST OF ENGLISH AS A FOREIGN LANGUAGE (TOEFL)** - Applicants whose primary language is other than English will be required to give evidence of proficiency in the English Language before being accepted. A minimum score of 550 (paper-based test), 213 (computer-based test), or 79-80 (internet-based test) on the TOEFL will be the standard for judging that an applicant is proficient in the English Language. (This may be waived for students who have completed a post-secondary degree at an institution in which the primary language of instruction is English.) Test scores must be no more than two years old. For more information on the TOEFL, contact: The Educational Testing Service, TOEFL/TSE Services, P.O. Box 6151, Princeton, NJ 08541-6151; (609) 771-7100; [www.toefl.org](http://www.toefl.org). This test may be taken on the TOEFL website.
2. **AFFIDAVIT OF FINANCIAL SUPPORT** and all supporting documents to verify sources of financial 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 will be mailed to the student.*

**SEVIS FEE FOR F-1 & J-1 STUDENTS:** On September 1, 2004, a new U.S. Department of Homeland Security rule went into effect that 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, log on to [www.unitedstatesvisas.gov/obtainingvisa/index.html](http://www.unitedstatesvisas.gov/obtainingvisa/index.html).

**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.



# NAZARENE THEOLOGICAL SEMINARY APPLICATION FOR ADMISSION

## PERSONAL INFORMATION

REV.  DR.  MR.  MRS.  MS.  MISS

APPLICATION DATE: \_\_\_\_\_

LAST NAME FIRST NAME MIDDLE/MAIDEN NAME

PERMANENT ADDRESS CITY STATE ZIP

HOME PHONE CELL PHONE EMAIL

MAILING ADDRESS (IF DIFFERENT FROM ABOVE) CITY STATE ZIP

SOCIAL SECURITY NUMBER DATE OF BIRTH BIRTH CITY & STATE

MARITAL STATUS NAME OF SPOUSE/FIANCÉ (IF APPLICABLE)

NAMES/AGES OF CHILDREN (IF APPLICABLE) HOW DID YOU HEAR ABOUT NTS?

### INTENDED MASTER'S DEGREE PROGRAM

Expected Term of Enrollment? Year: 20 \_\_\_\_\_ Semester (Select one):  Fall  Spring  Summer

Which campus will you be attending?  
(You are not limited to courses offered on any one campus)

- Kansas City, MO  Bethany, OK  Mount Vernon, OH  Nashville, TN  Quincy, MA

Which degree program do you wish to enroll in?  
(Please select only one. Note that the M. Div. and MACFD are the only degrees offered to students not re-locating to Kansas City)

- Master of Divinity  
 Dual Degree: Master of Divinity and Master of Arts in Counseling  
 Master of Arts in Christian Formation and Discipleship  
 Master of Arts in Intercultural Studies  
 Master of Arts (Theological Studies)

Are you interested in any of the following Certificate Programs?  
(Certificates are not required; if interested, please select only one and select either a certificate or a diploma, not both.)

- Biblical Languages  Cross-Cultural Ministries  Spiritual Formation  
 Chaplaincy Ministries  Evangelism  Urban Ministries  
 Christian Discipleship  Lay Ministries  Urban Youth Ministries  
 Church Planting  Missional Leadership & Discipleship  
 Compassionate Ministries  Pastoral Counseling

Are you interested in any of the following Diploma Programs?  
(Diplomas are not required; if interested, please select only one and select either a certificate or a diploma, not both.)

- Cross-Cultural Ministry (365M)  Children's, Ministry  Adult Ministry  
 Diaconal Ministries  Youth Ministry  Family Ministry

## CITIZENSHIP/RACE/ETHNICITY

Are you a citizen of the United States?  Yes  No    Are you a permanent resident of the United States?  Yes  No

Country of Citizenship: \_\_\_\_\_

The U.S. Department of Education requires NTS to report the following information regarding race and ethnicity. Please complete both sections:

Are you of Hispanic or Latino ethnicity?  Yes  No

Please indicate your race. If you are of mixed race, you may select more than one race.

- American Indian or Alaska Native (original people of North, Central & South America)
- Asian (Far East, Southeast Asia, India subcontinent)
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White (Europe, Middle East, North Africa)

## CHURCH AFFILIATION & MINISTRY EXPERIENCE

Denominational Membership \_\_\_\_\_ District/Conference \_\_\_\_\_

Are you:  Ordained  Licensed  Lay

PLEASE NOTE MINISTRY EXPERIENCE BELOW (*attach resume/CV, if desired*):

TITLE OF MINISTRY POSITION	LOCATION	DATES ( <i>from/to</i> )	VOLUNTEER OR STAFF

## ACADEMIC HISTORY

Have you been denied admission to any seminary or theological school?  Yes  No    If yes, please explain below:

\_\_\_\_\_

\_\_\_\_\_

PLEASE NOTE ALL PREVIOUSLY ATTENDED INSTITUTIONS:

UNIVERSITIES, COLLEGES, SEMINARIES & GRADUATE SCHOOLS	LOCATION	DATES ( <i>from/to</i> )	NAME OF DEGREE(S) EARNED OR NUMBER OF CREDITS EARNED

## REFERENCES

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

### PASTOR/ECCLESIAL SUPERVISOR REFERENCE:

NAME	TITLE		
CHURCH/COMPANY			
ADDRESS	CITY	STATE	ZIP
PHONE	EMAIL		

### PROFESSOR/ACADEMIC REFERENCE:

NAME	TITLE		
CHURCH/COMPANY			
ADDRESS	CITY	STATE	ZIP
PHONE	EMAIL		

### PERSONAL REFERENCE:

NAME	TITLE		
CHURCH/COMPANY			
ADDRESS	CITY	STATE	ZIP
PHONE	EMAIL		

## PERSONAL STATEMENT

Please attach a 750-1,000 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.

## SIGNATURE

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

Date

## APPENDIX: APPLICATION FOR ADMISSION INTO THE DIPLOMA IN CROSS-CULTURAL MINISTRY (365M)

*If applicable: Please complete the following additional questions pertaining specifically to 365M. Attach answers using supplemental pages as necessary.*

1. List your cross-cultural experience including location, goal and length of stay.
2. List any languages other than English in which you can converse.
3. Do you have a preference for your location of service? If yes, where? Why?
4. Briefly describe interaction during the past six months with people you do not see as your peers who are ethnically or culturally different than you.
5. Describe your understanding of the role of a learner in context, such as a 365M student. How do you see this in comparison with the role of those in short term mission or the role of long term missionaries and ministry leaders?
6. Have you ever been isolated from your emotional support system? Explain how you handled it.
7. When interacting with another culture do you see yourself as primarily a leader or primarily a learner? Explain.
8. What do you do when you are working in a group and the leader makes a decision with which you disagree?
9. Do you prefer to work alone or in a group? Explain why.
10. Are you a self-starter: always, frequently, sometimes or not at all?
11. What motivates you?



# NAZARENE THEOLOGICAL SEMINARY

## REFERENCE FORM – PASTOR/ECCLESIAL

### TO BE COMPLETED BY THE APPLICANT

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NAME OF APPLICANT \_\_\_\_\_

ANTICIPATED PROGRAM OF STUDY \_\_\_\_\_

The Family Education Rights and Privacy Act of 1974 (Buckley Amendment) provides students a right to review their educational records. The law also permits applicants to waive this right, an action that may protect the integrity of recommendations and references. Please indicate your decision to waive or not waive this right by checking the appropriate statement and signing your name on the line below.

- I hereby waive my right to examine this reference.
- I do not waive my right to examine this reference.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

### TO BE COMPLETED BY THE RECOMMENDER

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1. Please evaluate the applicant in the following areas:

	FAR ABOVE AVERAGE	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	FAR BELOW AVERAGE	NOT OBSERVED
Aptitude for Ministry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic Aptitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Christian Character and Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Church Involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Stability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpersonal Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work Habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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. Do you see the applicant as someone whom you would hire, have as your pastor/associate pastor, or someone you would like to work with as a colleague?  Yes  No  Unsure If yes/unsure, please elaborate:

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5. How likely is the applicant to succeed in future ministry contexts? **365M APPLICANTS ONLY:** Does the applicant engage in conversations and activities with others who are not their peers and/or who are ethnically different from them?

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6. **365M APPLICANTS ONLY:** The objective of 365M is for students to respect, listen to and learn from people of other cultures and ethnicities. Do you see this person as someone who can live in a new culture for a year as a learner of others? Please explain.

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

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8. The recommendation you give this applicant for admission to Nazarene Theological Seminary:  
 Highly recommend  Recommend  Recommend with reservations  Do not recommend

9. Additional Comments (attach letter if necessary):

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RECOMMENDER'S INFORMATION & SIGNATURE

Name Title

Church/Organization

Address City, State, Zip

Phone Email

Signature Date

*Thank you! Please return completed form to NTS (address and fax number on reverse side).*



# NAZARENE THEOLOGICAL SEMINARY

## REFERENCE FORM – ACADEMIC PROFESSOR

TO BE COMPLETED BY THE APPLICANT

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NAME OF APPLICANT \_\_\_\_\_

ANTICIPATED PROGRAM OF STUDY \_\_\_\_\_

The Family Education Rights and Privacy Act of 1974 (Buckley Amendment) provides students a right to review their educational records. The law also permits applicants to waive this right, an action that may protect the integrity of recommendations and references. Please indicate your decision to waive or not waive this right by checking the appropriate statement and signing your name on the line below.

- I hereby waive my right to examine this reference.
- I do not waive my right to examine this reference.

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

TO BE COMPLETED BY THE RECOMMENDER

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1. Please evaluate the applicant in the following areas:

	FAR ABOVE AVERAGE	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	FAR BELOW AVERAGE	NOT OBSERVED
Aptitude for Ministry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic Aptitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Christian Character and Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Church Involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Stability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpersonal Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work Habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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?

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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 are aware of?

\_\_\_\_\_

\_\_\_\_\_

8. Do you know of any physical, mental or emotional problems that might hinder effective work in Christian ministry?

Yes  No  Unsure      If yes, please elaborate: \_\_\_\_\_

\_\_\_\_\_

9. The recommendation you 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):

\_\_\_\_\_

\_\_\_\_\_

#### RECOMMENDER'S INFORMATION & SIGNATURE

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Church/Organization

\_\_\_\_\_  
Address City, State, Zip

\_\_\_\_\_  
Phone Email

\_\_\_\_\_  
Signature Date

*Thank you! Please return completed form to NTS (address and fax number on reverse side).*



# NAZARENE THEOLOGICAL SEMINARY

## REFERENCE FORM – PERSONAL

### TO BE COMPLETED BY THE APPLICANT

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NAME OF APPLICANT \_\_\_\_\_

ANTICIPATED PROGRAM OF STUDY \_\_\_\_\_

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- I do not waive my right to examine this reference.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

### TO BE COMPLETED BY THE RECOMMENDER

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	FAR ABOVE AVERAGE	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	FAR BELOW AVERAGE	NOT OBSERVED
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Academic Aptitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Christian Character and Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Church Involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Stability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpersonal Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work Habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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?

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5. What qualities do you affirm in him/her for future ministry?

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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 you give this applicant for admission to Nazarene Theological Seminary:

Highly recommend  Recommend  Recommend with reservations  Do not recommend

8. Additional Comments (attach letter if necessary):

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RECOMMENDER'S INFORMATION & SIGNATURE

Name \_\_\_\_\_ Title \_\_\_\_\_

Church/Organization \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Thank you! Please return completed form to NTS (address and fax number on reverse side).*