



# Application Form

## APPLICANT INFORMATION

Full legal name \_\_\_\_\_  
last first middle name usually called

Current mailing address \_\_\_\_\_  
House number and street name city

\_\_\_\_\_ Telephone \_\_\_\_\_  
county postcode area code/number (mobile) area code/number (landline)

Home country \_\_\_\_\_ Citizenship \_\_\_\_\_  
country

E-mail address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of birth \_\_\_\_\_  
day month year city/country

Marital status: \_\_\_\_\_ Sex:  Male  Female

Ethnic Group (For reporting purposes only): \_\_\_\_\_ National Insurance No. \_\_\_\_\_

## PURPOSE IN SEEKING A SEMINARY EDUCATION

Please summarise the reason/s you seek to study theology

Where is your current church membership?

\_\_\_\_\_ name of church mailing address city postcode

\_\_\_\_\_ phone pastor's name date of membership

Are you currently attending the church that holds your membership?  Yes  No (if no, please explain on a continuation sheet)

Is the church that holds your membership affiliated with a denomination?  Yes  No

If yes, what denomination? \_\_\_\_\_

## EDUCATIONAL INFORMATION

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Education beyond high school. Please list all institutions attended including college, university, seminary, and professional training:

|                             |               |                |                                   |
|-----------------------------|---------------|----------------|-----------------------------------|
| Name of institution in full | City, Country | dates attended | Degree or qualification conferred |
|-----------------------------|---------------|----------------|-----------------------------------|

|                             |               |                |                                   |
|-----------------------------|---------------|----------------|-----------------------------------|
| Name of institution in full | City, Country | dates attended | Degree or qualification conferred |
|-----------------------------|---------------|----------------|-----------------------------------|

|                             |               |                |                                   |
|-----------------------------|---------------|----------------|-----------------------------------|
| Name of institution in full | City, Country | dates attended | Degree or qualification conferred |
|-----------------------------|---------------|----------------|-----------------------------------|

|                             |               |                |                                   |
|-----------------------------|---------------|----------------|-----------------------------------|
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|                             |               |                |                                   |
|-----------------------------|---------------|----------------|-----------------------------------|
| Name of institution in full | City, Country | dates attended | Degree or qualification conferred |
|-----------------------------|---------------|----------------|-----------------------------------|

|                             |               |                |                                   |
|-----------------------------|---------------|----------------|-----------------------------------|
| Name of institution in full | City, Country | dates attended | Degree or qualification conferred |
|-----------------------------|---------------|----------------|-----------------------------------|

**Note: An official transcript from each institution is required**

## EMPLOYMENT INFORMATION

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Please list your last four employers beginning with the most recent:

|                  |               |                     |
|------------------|---------------|---------------------|
| Name of employer | Position held | dates of employment |
|------------------|---------------|---------------------|

|                  |               |                     |
|------------------|---------------|---------------------|
| Name of employer | Position held | dates of employment |
|------------------|---------------|---------------------|

|                  |               |                     |
|------------------|---------------|---------------------|
| Name of employer | Position held | dates of employment |
|------------------|---------------|---------------------|

|                  |               |                     |
|------------------|---------------|---------------------|
| Name of employer | Position held | dates of employment |
|------------------|---------------|---------------------|

## INTERNATIONAL STUDENTS

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**If you are not a citizen of the UK please complete this section.** Please note that international applicants are encouraged to apply in good time.

In which country were you born? \_\_\_\_\_

In which country are you currently a citizen? \_\_\_\_\_

If you are now residing in the UK what is your immigrant or non-immigrant classification? \_\_\_\_\_

What is your mother tongue? \_\_\_\_\_

What other languages do you speak? \_\_\_\_\_

Unless you are studying in your native language at an extension centre, you are required to submit a TOEFL (Test of English as a Second Language).

## DATE OF COMMENCEMENT

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Please indicate the semester (term) in which you plan to begin:

Autumn Semester (starts end August)  Spring Semester (starts end January)

Year: \_\_\_\_\_

Indicate the programme to which you are seeking admission:

- Bachelor of Divinity, BDiv  
 Master of Divinity, MDiv  
 Master of Ministry for Ruling Elders, MMRE  
 Postgraduate Research Programme, ThM

## PERSONAL INFORMATION

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Where you answer "yes" below please provide appropriate details/documentation on a continuation sheet:

1. Do you have any physical, mental, or emotional disabilities which may require special assistance?  Yes  No
2. Do you have learning disabilities or mental/physical condition(s) that might affect your academic work?  Yes  No
3. Have you ever been under the care of a psychologist, mental health counsellor, or psychiatrist?  Yes  No
4. Have you ever declared bankruptcy, or experienced legal action against you in relation to your finances?  Yes  No
5. Do you have existing debts aside from house and car?  Yes  No
6. Is it a problem for you to pay off the balance of your credit cards on a regular basis?  Yes  No
7. Will you incur debt by attending seminary? If yes, provide your plans for financing your seminary education.  Yes  No
8. Have you ever been dismissed, placed on academic, or disciplinary probation, or asked to withdraw by any educational institution?  Yes  No
9. Have you ever been convicted of any felony or been dishonourably discharged from any branch of the Armed Services?  Yes  No
10. Have you ever been dismissed from any place of employment?  Yes  No
11. Have you ever used illegal drugs or abused alcohol?  Yes  No
12. Have you ever appeared on a sex offender register?  Yes  No
13. Have you or your spouse ever been divorced?  Yes  No
14. Have you ever been involved in any sexual misconduct of any nature?  Yes  No
15. Does your spouse or family have any reservations concerning your desire to attend seminary?  Yes  No

## FAMILY

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Spouse's name

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Children (use continuation sheet if required):

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|      |     |               |
|------|-----|---------------|
| name | M/F | date of birth |
|------|-----|---------------|

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|      |     |               |
|------|-----|---------------|
| name | M/F | date of birth |
|------|-----|---------------|

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|      |     |               |
|------|-----|---------------|
| name | M/F | date of birth |
|------|-----|---------------|

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|      |     |               |
|------|-----|---------------|
| name | M/F | date of birth |
|------|-----|---------------|

## SIGNED STATEMENT

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I confirm that all the above details are correct.

In making application to become a student at The Westminster Presbyterian Theological Seminary I pledge to abide by all the regulations of the Faculty and administration; actively to uphold the good name of the institution; to preserve and protect the physical properties of the Seminary; and to cooperate with the Seminary family in contributing to a spirit of Christian fellowship throughout my student days.

I understand that the Seminary reserves the right to request a student to withdraw at any time.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please submit by email to [Jono.broom@wpts.org.uk](mailto:Jono.broom@wpts.org.uk) , or post to:

*Westminster Seminary, Alderman Fenwick's House, 98-100 Pilgrim Street, Newcastle Upon Tyne, NE1 6SQ*