



Gurukul Lutheran Theological College & Research Institute,

Kilpauk, Chennai - 600 010

FORM OF APPLICATION FOR ADMISSION TO BACHELOR OF DIVINITY COURSE

Affix
35mm x 45 mm
Size Photo

PART A

1. Name of the Applicant in full:
(in Capitals as in Board/Degree Certificate)

2. Date of Birth :
(as per School Certificate)

3. Sex : Male Female

4. Permanent Address :
(Mention Pin Code and State also)

5. Postal Address to which Communication has to be sent :
(Write in Capital letters the full address,
mention if you have a Post Box Number)

6. Telephone Number :

Fax Number :

E Mail Address :

7. Mother Tongue:

8. Academic Qualifications:

Degree	Class Obtained	Year of Passing
a) Bachelor's Degree(Secular)		
b) Master's Degree (Secular)		
c) Theological Degree		
d) Any Other		

9. Medium of your Instruction: _____ Secondary School: _____
University: _____

10. Other Languages Studied (with duration) : _____

11. Indicate past and present work experience (with dates) : _____

12. Marital Status: Married Unmarried Other

13. Name of the Parent or Guardian and Occupation : _____

14. Annual Income of Parent or Guardian : _____

15. Church (Denomination) of which you are a member: _____

16. Length of Communicant Membership (enclose a letter from your Pastor or Presbyter indicating the status of your membership)

17. a) Are you a sponsored candidate of your Church Yes No
b) If yes, give the name and address of your Bishop or President or General Secretary of the Association. (Enclose a letter from such Church authority sponsoring your candidate)

18. Person(s) responsible for your financial support while in the college (enclose a letter from the Church authorities or others who will take responsibility for your financial support, attesting that fact)

19. If you have also applied to other Theological Colleges for admission, mention the names of those Colleges/Seminaries

1. _____

2. _____

PART B

(To be filled in by married applicants)

1. Wife's/Husband's name :		Age :
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2. Educational Qualification :		
<hr/>		
3. Is she / he employed ? If so, the nature and length of her/his service :		
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4. Number of Children:		
Name	Sex	Age
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PART C

Details of Academic Qualifications (To be filled in by B. Th. Degree Holders - Enclose Photocopy of marks Statement obtained from the Senate. Do not send any Original Certificates - Refer Prospectus)

1. Name of the College or Seminary where you did your theological studies:	
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2. Registration No. With year (If Senate of Serampore) :	
<hr/>	
3. Class & Grade Obtained :	
<hr/>	
4. Year of Passing :	
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5. Marks obtained in Qualifying English Paper I :	Paper II :

DOCUMENTS NEEDED FOR ADMISSION

1. Money Order Receipt/Demand Draft for Rs. 300 (Registration fee)
2. Proof of age (Copy of Birth / Baptism Certificate / School Leaving Certificate)
3. Two Passport size photographs (Other than the one affixed in this form)
4. Photocopies of degree certificates (Secular as well as Theological duly attested by a Gazetted Officer) Provisional Certificates are not accepted.
5. Photocopy of B.Th. Marks Statement obtained from the Senate of Serampore College / Other Institution (Transcript of Record from the Senate duly attested by a Gazetted Officer)
6. A letter from Pastor/Presbyter indicating the status of Communicant membership
7. A letter from Bishop/Church authority indicating the nature of sponsorship (in case of sponsored candidates only)
8. Letter from those guaranteeing financial support
9. A brief Auto-biographical statement on a separate sheet of paper with special reference to those influences significant for my interest to pursue theological education.
10. Part D of this Form (Reimbursement of Medical Expenses duly signed by Parent/Sponsor)
11. Character and conduct certificate from the institute last attended.

Date:

Signature of the Applicant

NOTE : No application will be entertained unless the above documents are attached.

Mail this form to: The Principal, Gurukul Lutheran Theological College, 94, Purasawalkam High Road, Kilpauk, Chennai - 600 010.

PART D

REIMBURSEMENT OF MEDICAL EXPENSES

(This is not a Financial Guarantee Letter)

To

The Principal
Gurukul Lutheran Theological College
94, Purasawalkam High Road,
Kilpauk, Chennai - 600 010.

I / We hereby assure that I / we will reimburse all medical expenses if incurred by the College in case of emergency on behalf of _____ during his / her stay in Gurukul Lutheran Theological College.

Date :

Signature of Parent / Guardian / Sponsor