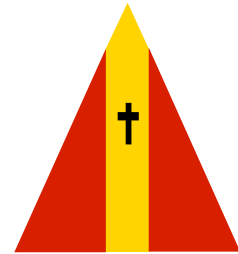


HOOD THEOLOGICAL SEMINARY
1810 Lutheran Synod Drive
Salisbury, NC 28144
Application for Admission
Master of Divinity (M.Div)



(Please send type or print in blue or black ink. The application must be returned with the non-refundable application fee of \$30.00)

Applying for: First Year Transfer Re-Admission

Semester you wish to enroll Fall Spring Track 1 (Tues., Wed., Thurs.) Track 2 (Weekend)

Main Campus _____ **Alabama Extension Campus** _____

Personal Data

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 _____

Phone Home _____ Mobile Number _____ E Mail _____

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

Ethnicity: _____ Gender: _____ Profession: _____ Title: _____

Marital Status: *(check one)* ___ Married; ___ Single; ___ Divorced; ___ Widowed

Place of employment _____ Work Number _____

Are you eligible for veteran benefits? (Y) (N) Will you be a candidate for financial aid? (Y) (N)

Educational Information *(If additional space is needed, please clip or staple extra sheet)*

Undergraduate College/University: _____ Degree: _____

City & State where located: _____ Graduation Date: _____

Major(s) _____

Graduate Schools: _____ Degree received? (Y) (N)

City and State where located: _____ Degree & Date: _____

Other: _____

How did you hear about Hood Theological Seminary?

Internet Church Conferences College/Recruitment Fair Referral Colleague/Friend

Informational Meetings Other

Ecclesiastical Information

Denomination or Faith Community: _____

Status: _____ 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 names, positions of 3 references and ask them to fill out the enclosed forms and send them to the Office of Admissions. Note: Family members can not be used as references.

1. Pastor: Name: _____ Position: _____
Address: _____

2. Judicatory Official: Name _____ Position: _____
(If none, colleague)
Address _____

3. Former Professor/employer: Name: _____ Institution: _____
Address: _____

Conduct: (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

(The Hood Theological Seminary reserves the right to conduct a criminal background check on all applicants. If the Hood Theological Seminary chooses to conduct a criminal background check, pursuant to applicable law, you will be provided with adequate notice and an opportunity to confirm or deny the accuracy of any information contained in a criminal background investigation record).

Statement of Purpose

Write a paper (not more than four typed, double-spaced pages) reflecting your faith journey, religious experience, future plans, and the importance to you of an education from Hood Theological Seminary.

ALL APPLICANTS MUST SIGN BELOW

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: _____

** 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

* 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.