

1810 Lutheran Synod Drive Salisbury, NC 28144

Master's Application

Personal Information

Name	Last	First		Middle	
Name on Previous	Academic Records, if diffe	erent Pre	eferred Name		
Current Address	Street or P.O. #	City	State	Ziţ	
Phone Home		Mo	obile Number		
Email Address					
Date of Birth:/	/ Country of bi	irth:	Soc. Sec #:		
Gender: □ Female	□ Male				
Are you a United S	tates citizen? □ Yes □ No				
Marital Status: (che	eck one) Married Sing	le 🗆 Divorced	□ Widowed		
Are you eligible for	r veteran benefits? Yes	¬ No Branch			
The jour engione for		= 110 Branen.			
	ly for financial Aid? □Yes				
Do you plan to appl					
Do you plan to appl	ly for financial Aid? □Yes nterest (Check one only)		Master of Theology Studies □ Biblical Studies □ History & Theolog		
Do you plan to apple Degree Program I	ly for financial Aid? □Yes nterest (Check one only)		Master of Theology Studies		
Do you plan to apple Degree Program I Master of Divinity	ly for financial Aid? □Yes nterest (Check one only)		Master of Theology Stude □ Biblical Studies □ History & Theolog		
Do you plan to apple Degree Program I Master of Divinity Non Degree When do you plan Fall	ly for financial Aid? ¬Yes nterest (Check one only)	□ No	Master of Theology Stude □ Biblical Studies □ History & Theolog		

Master Application

Educational Information

Please list information for all post-secondary institutions attended (beyond high school), including any institution where you are currently enrolled.

Institution	Location (City and State)	Attendance Dates	Degree	Degree Received	GPA
	(Oily min state)	- Duttes			
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Are you transferring from Have you applied or attended	-		viously? □Yes □	No	
Ecclesiastical Information or Faith Co	t ion mmunity:				
If you are A.M.E. Zion, Unit	ed Methodist, A.M.E., C	C.M.E., what is	your annual confere	nce?	
Status:LicoLico					nation)
Data regarding your highe	st clergy credentials:	Date:	Where? _		
By whom	Eccle	esiastical Autho	ority:		
References Give the names, positions of Admissions. Note: Family me			enclosed forms and	send them to the Offi	ce of
Name S	treet Address	City	State	Zip	Phone
Pastor					
Judicatory Official/ Colleagu	e				
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Master Application

Statement of Purpose

Write a paper (two page essay) reflecting your faith journey, religious experience, future plans, and the importance to you of an education from Hood Theological Seminary.

Background Information

(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? \(\simega \text{ Yes} \square \text{No}\) Have you ever been convicted of a felony, misdemeanor (other than a minor traffic violation), or any incident of sexual misconduct? \(\simega \text{ Yes} \square \text{No}\) 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? \(\simega \text{ Yes} \square \text{No}\)
If you answered yes to any of the above questions, please explain.
Optional Information We request racial/ethnic information to aid in our statistical reporting to governmental and accrediting agencies. Hood Theological Seminary does not unlawfully discriminate in the administration of its employment, education or admissions policies.
Hispanic/ Latino □ Yes □ No Racial and ethnic background □ Black or African-American □ White/Caucasian □ American Indian or Alaska Native □ Asian □ Non-resident alien □ Two or more races □ Native Hawaiian or Pacific Islander □ Other
Signature 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: