## **Application for Admission**

## Reformation International Theological Seminary

Name:. (last)	(first)	(mid	dle)
Mailing Address:	, ,	`	,
Delivery Address:			
City: Pro			Country:
Home Phone: ()	Business Phone: (		Fax: ()
E-Mail address:	@		
Of what country are you a citizen?	I	Place of Birth	Birth Date
Single Married Separa	ated Divorced Re	married	
Number of children:	Ages:		_
EDUCATIONAL GOALS: Do you plan to graduate from Reform IF YES	_	cal Seminary?	☐ No
DEGREE:			following courses:
MAJOR:	☐ Licentiat	e Diploma in Theology	
ECCLESIASTICAL INFOR	MATION:		
Name of Church:		Denomina	ational Affiliation:
Street:			
City:	Province/State: _	Zip/Post C	Code: Country:
Pastor's Name:	·	Phone Number: (	)
Are you a member? Yes N	o How often do you attend	1? Ye	ears attended
Ordained/Licensed? Yes N	o If yes, in what capacity ar	nd when?	Still current?
Have you ever been under church/ecc	elesiastical discipline?	s No If yes, explain	n (on separate paper).
PERSONAL REFERENCES	(not from family members)		
Name:	Address	:	
City:	Province/State: _	Zip/Post C	Code: Country: _
Business Phone: ()	Home Phon	e: (	
Name:	Address	:	
City:	Province/State: _	Zip/Post C	ode: Country: _
Business Phone: ()	Home Phon	e: (	
If English is not your first language 1	yaya yayı takan tha TOEEL ?	□ Vos. Doto:	□ No

Se	nd the following information to Reformation Internation	al Theological Seminary (see address below).
1.	This application appropriately filled out.	
2.	Transcripts of any college/seminary level work completed.	
3.	A written (a) statement of faith, (b) statement giving reasons for pu	rsuing a program of theological study.
4.	Letters from the two personal references listed above, stating their International Theological Seminary. ** Only required for M.Div. of	knowledge of you and recommendation to Reformation
5.	A letter of recommendation from your church session, consistory,	4.4
	** Only required for M.Div. applicants **	, 1
6.	One or more Proctor Application forms completed and signed by the	ne person(s) willing to proctor your exams.
7.	A \$100 application fee, paid online here: https://gorcm.org/produ	
8.	A completed Study Hours Estimation Form.	tegapp lee. Ote with a check at the address selow.
Ple	ease read and sign the following:	
	ertify that:	
	All of the information I have provided to Reformation International The	eological Seminary is accurate and truthful.
2.	I have read the Reformation International Theological Seminary catal	og and understand the regulations governing Reformation
_	International Theological Seminary.	
3.	I am in agreement with the policies and standards of Reformation Into them and live by them if I am accepted as a student at Reformation Inte	ernational Theological Seminary and am willing to uphold ernational Theological Seminary.
4.	I acknowledge that no other representations have been made to me in with Reformation International Theological Seminary catalog.	writing, electronically, or orally other than what is stated in
5.	I will do all my own work and will not share my work with other studen	nts.
6.	I will not make copies of any recorded or written materials supplied by written approval from Reformation International Theological Seminary	y Reformation International Theological Seminary without
7.	I understand that if it is ever discovered that I have violated this agree	
	Theological Seminary, all courses given may be counted as failures, as	
	revoked, and there will be no refunds of any monies paid or owed to the	e seminary. There is no time limit to these penalties.
Ha	ving fully understood this and freely agreed to it, I have placed my signar	ture and the date below.
	Student Signature	Date

Please send this information to:

Reformation International Theological Seminary

Attn: Registrar 1300 East University Blvd. Melbourne, FL 32901 Telephone: (772) 663-8844

E-mail: registrar@reformation.edu