Application for Admission for Doctoral Studies

Reformation International Theological Seminary

☐ Mr. ☐ Miss ☐ Mrs.				Other Titles Rev. Dr. Other
(last)	(first)	(n	niddle)	
Mailing Address:				
Delivery Address:				
City: Provin		Zip	Country:	
Home Phone: ()	Business Phone: (Fax: ()	
E-Mail address:	@			
Of what country are you a citizen?	I	Place of Birth	Birth D	ate
☐ Single ☐ Married ☐ Separated	l Divorced Re	married		
Number of children: Ag	ges:			
EDUCATIONAL GOALS:				
Program of Interest:			☐ M.A.C.S. (via th	nesis)
ECCLESIASTICAL INFORMA				
	nurch: Denominational Affiliation:			
Street:				
City:			ode/Zip:	Country:
Pastor's Name:	·	Phone Number: ()	
Are you a member? Yes No H	ow often do you attend?	Ye	ears attended	
Ordained/Licensed? Yes No If yes, in what capacity and when? Still current? _				
Have you ever been under church/eccles	iastical discipline? Yes	s ☐ No If yes, exp	lain (on separate paper).

PERSONAL REFERENCES (not from family members)

Name:	Address:		
City:	Province/State:	Zip/Post Code:	Country:
Business Phone: (Home Phone: (
Name:	Address:		
City:	Province/State:	Zip/Post Code:	Country:
Business Phone: (Home Phone: (
 This application appropriately compled. Transcripts of college/seminary leveled. A written (a) statement of faith, (b) settleters from the two personal referent heological Seminary. A letter of recommendation from your form a state of the commendation from your form. A \$100 application fee, paid online her following: I certify that: All of the information I have provided. I have read the Reformation International Theological Seminary. I am in agreement with the policies them and live by them if I am accepted as the Reformation International Theological I will do all my own work and will not shoughlied by Reformation International Theological I will do all my own work and will not shoughlied by Reformation International Theological Seminary Administration. I understand Reformation International Theological Sethe seminary may be revoked, and there we penalties. Having fully understood this and 	tatement giving reasons for pursuinces listed above, stating their known received above, stating their known received to Reformation International trional Theological Seminary of a student at Reformation Internations have been made to me Seminary catalog. Theological Seminary without that if it is ever discovered minary, all courses given may will be no refunds of any monice	wledge of you and recommendated of elders, or pastor. pp-fee/ OR with a check at the recatalog and understand the relational Theological Seminary in writing, electronically, or written approval from Reformational I have violated this ag be counted as failures, any as paid or owed to the seminary	urate and truthful, egulations governing Reformation eminary and am willing to upholo y, and r orally other than what is stated in f any recorded or written materials remation International Theological reement, I may be expelled from degrees that have been granted by ary. There is no time limit to these
Student Sig	nature		Date

Please send or email this information to:

Reformation International Theological Seminary

Attn: Registrar 1300 East University Blvd. Melbourne, FL 32901 U.S.A.

Telephone: (772) 663-8844

Or E-mail application to: registrar@reformation.edu

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