ASIA PACIFIC THEOLOGICAL SEMINARY

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APPLICATION FOR ADMISSION TO D. MIN. IN PENTECOSTAL/CHARISTMATIC MINISTRIES

Please attach a recent photograph

For Official Use Only – Do not mark here

Transcripts:	Applic. Fee: _____	Min. Essay: _____	Date Received: _____
College/University: _____	References: 1 2 3 4	English Score: _____	Date Accepted: _____
Seminary: _____	Medical Report: _____	Sample Paper: _____	Date Notified: _____

1. Full name: _____
Family First Middle

2. Mailing Address: _____

3. Telephone: _____ FAX Number (if any) _____ Email: _____

4. Date of Birth: _____ Age:_____ Sex: Male

5. Place of Birth: _____ Nationality: _____

6. Marital Status: ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

7. If married, give your spouse's name _____
(Please attach a copy of your marriage certificate when submitting this application.)

8. Educational Attainment

	Name of School	Location	Diploma Earned	Year graduated
College/Univ.				
Seminary				
Other				

(All transcripts must be sent directly to the APTS Registrar from the school(s) concerned.)

9. What languages do you speak or write with a measure of fluency? _____

10. When were you converted to Christ? _____ Where? _____

11. Have you been baptized in water by immersion? ☐ Yes ☐ No

12. Have you received the Holy Spirit according to Acts 2:4; 10:46; 19:6? ☐ Yes ☐ No
If yes, when and where? _____

13. Have you been living a consistent Christian life since your conversion? Yes No

14. With what denomination/organization are you affiliated? _____

15. Do you hold ministerial credentials? ☐ License ☐ Ordination ☐ Others (specify) _____

16. In what ministry you are currently engaged?
☐ Pastor ☐ Missionary ☐ Evangelist ☐ Teacher ☐ Other (specify) _____

17. Are you involved in full-time ministry? ☐ Yes ☐ No
If no, do you plan to become a full-time minister? ☐ Yes ☐ No

18. List any ministries in which you have engaged up to the present? _____

19. Briefly state why you believe a D. Min. from APTS will enhance your future ministry.

_____
_____
_____
_____

20. Do you have the approval or blessing of your sponsoring church, denomination, or individual sponsor to pursue postgraduate studies at this time? ☐ Yes ☐ No

21. State your general health: ☐ Excellent ☐ Good ☐ Fair ☐ Poor
Have you had tuberculosis? ☐ Yes ☐ No
Have you ever had a nervous problem? ☐ Yes ☐ No
Have you ever used drugs? ☐ Yes ☐ No
(If the answer is yes to any of the above, please attach a separate sheet explaining in detail.)

22.a. Will you live ☐ off campus? ☐ In an APTS dorm? ☐ In APTS married student housing?
b. If on campus, ☐ during modules only ☐ year around

23. Finances
Do you have, or can get, sufficient finances to pay your school and living expenses while at APTS? (see catalog).
☐ Yes ☐ No

State the number of persons depending on you for financial support _____

24. Give complete name and address of four (4) references

	Name	Address	Phone
a.			

Denomination leader

b. _____
President, dean, or faculty of Bible college, seminary, or university.

c. _____
Local pastor

d. _____
Other

26. If your views differ from the doctrinal statement of APTS in the current catalog, state how on a separate sheet.

27. If accepted, will you abide by the standards of APTS and cheerfully submit to those in authority? ☐ Yes ☐ No

28. I understand that final acceptance for study is contingent upon the results of a careful evaluation of the Post-Graduate committee. Initials _____

29. I also understand that I must not depart for the APTS resident campus until I have received notification from the D. Min. program director. Initials _____

30. I am enclosing the following to avoid delay in processing my application
☐ required application fee, US $25 (subject to change)
☐ pertinent school transcripts ☐ completed medical form
☐ sample research paper ☐ an extra photo

31. On a separate sheet of paper, please write why you plan to study in the D. Min. in Pentecostal/Charismatic Ministries program. (700 to 1000 words).

_____
Signature of Applicant

_____
Date