



CUMMINS MEMORIAL THEOLOGICAL SEMINARY

705 South Main Street
Summerville, SC 29483

Telephone: 843-873-3451 * Fax: 843-875-6200

APPLICATION FOR ADMISSIONS

Application Checklist

The following items are required in the application process. To avoid delays in the application process, please check off each item as it is completed. All information should be submitted to the Seminary Admissions Office at the above address.

- Application
- Non-refundable \$50 application fee
- Official college or high school transcript
- Personal statement (up to 500 words) describing your Christian experience, sense of religious vocation, and reasons for seeking a seminary education
- Three letter of recommendation. One should be from your pastor. (Forms supplied.)

Personal Information (Please Print.)

Name _____ Sex: ___ Male ___ Female
Last First MI

(If your name now differs from the name appearing on any of the document which supports this application, place the name used on the line below.)

Name _____ DOB ____/____/____
Last First MI

SS#: _____ - _____ - _____ Day Phone: () _____ - _____ Home Phone: () _____ - _____

Present Mailing Address: _____

City: _____ State: _____ ZIP Code _____

Permanent Mailing Address (if different from above) _____

Ethnic Origin (optional)

- | | |
|--|---|
| <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> American Indian/Alaskan Native |
| <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Asian, Pacific Islander | _____ Country of Citizenship |
| <input type="checkbox"/> Hispanic | |

If you are an international student, please indicate your current Visa status: _____

Marital Status (optional) circle one: Single Married Separated Divorce Widowed

Spouse's Name _____ Number of Dependent Children _____

Enrollment Information

Applying as: _____ New Student _____ Transfer Student

Planning to attend: _____ Full Time _____ Part Time

Have you previously applied to **Cummins Memorial Theological Seminary**? _____ Yes _____ No

If yes, when did you apply: _____ Were you admitted? _____

Expected Date of Entrance: _____

Program for which you are applying:

_____ Master of Divinity _____ M.A., Christian Leadership _____ M.A., Biblical Counseling
_____ B.Th., Pastoral Ministry _____ Certificate in Biblical Studies _____ Certificate/Diploma, Biblical Counseling
_____ Licentiate in Diaconal Ministry

How were you influenced to apply to **Cummins Memorial Theological Seminary**?

All applicants are required to provide **three references**, one of which must be that of your pastor. If you are a pastor, please supply a reference from someone who is in authority over you. Reference forms are provided for your convenience.

Please list those who will be supplying those references:

Name _____ Relationship: _____

Name _____ Relationship: _____

Name _____ Relationship: _____

Ecclesiastical Status

Denomination? _____ Are you ordained? _____ Office? _____

If not ordained, are you planning to seek ordination? _____ By what body? _____

Local church membership: _____

Street Address _____

City: _____ State: _____ ZIP Code _____

Name of Pastor: _____ Pastor's Phone No.: (_____) _____ - _____

Educational Background

Please list all colleges, universities, graduate, and professional school(s) attended beyond high school, starting with the most recent. If there is insufficient space below, please attach an additional sheet. ***It is your responsibility to see that official transcripts are sent directly to the Seminary Admissions Office by every school you have attended since high school.***

School	Major	Dates of Attendance	Degree Awarded

If you do not feel your transcript(s) provide the Admissions Office with an adequate portrait of your abilities, provide an explanation in the space provided below.

If you do not hold a four-year baccalaureate degree from an accredited college or university, please provide the following information:

High School: _____ Date Graduated: _____

Address: _____

If you do not hold a high school diploma, do you hold a GED? Yes No Date Passed? _____

Have you ever been suspended or dismissed from any school? Yes No If yes, explain below:

Do you have any health concerns, (personal or family) which might have an impact on your seminary training? (***optional***)

Activities and Interests

Please list extracurricular and/or avocational activities, if any, in which you participate(d):

Please list church or campus ministry activities, if any, in which you participate(d):

Please list any honors you have received, and briefly state the significance of the award:

ACTIVITIES (Continued)

Please list your hobbies and other interests:

Employment

Please list jobs you have held, starting with the most recent. Include military experience, homemaking, and volunteer work. Briefly describe your responsibilities and your contributions in each position. If available, please attach a copy of your most recent resume.

Employer: _____ Dates: (mo/yr) _____ to _____

Position Held: _____ Hours per week: _____

Responsibilities & Contributions: _____

Employer: _____ Dates: (mo/yr) _____ to _____

Position Held: _____ Hours per week: _____

Responsibilities & Contributions: _____

Employer: _____ Dates: (mo/yr) _____ to _____

Position Held: _____ Hours per week: _____

Responsibilities & Contributions: _____

Personal Statement

On a separate sheet of paper, write a brief (up to 500 words) statement describing your Christian experience, sense of religious vocation, and reasons seeking seminary training.

Additional Information

If you wish, please use a separate sheet to include any additional information about yourself and your application to **Cummins Memorial Theological Seminary** which would help the Admissions Office in considering your application.

Application

I hereby make application to **Cummins Memorial Theological Seminary** and affirm that, to the best of my knowledge, all information is complete and accurate. I understand that my application must be accompanied by a non-refundable \$50 fee.

Do you agree to test every question according to the teachings of Holy Scripture? _____

Signature

Date