

## **CATALOG 2019 - 2024**





## **APPLICATION INSTRUCTION**

# **APPLICATION**

## **INSTRUCTIONS**

If you are making an application for the Associates or any of the Bachelor degree programs, please complete "all" forms on pages 118 through 119. (See <a href="https://www.conservative.edu">www.conservative.edu</a> catalog link)

Remember, three letters of recommendation are to be completed by the one making the recommendation and mailed directly to the Admissions Office.

You may follow the step-by-step instructions as listed below.

Complete each form fully, and remember to sign in all places required.

Return your completed application packet with check for \$105.00 (see Fees Schedule Page 97 catalog) to:

Department of Admissions
Conservative Theological University
12021 Old St. Augustine Road
Jacksonville, Florida 32258

For your convenience in completing your application for admission, please review the following:

- 1. Application completed, dated, and signed, with recent photo.
- 2. Statement of Faith read and signed.
- 3. Three letters of recommendation given out to be completed and returned by the one making the recommendation, (returned directly by recommender to CTU). See pgs. 158 to 163 for Letters of Recommendation
- Transcript request completed and mailed to your previous school. If you have more than one school, please feel free to photocopy this form.
   See Pg. 156
- 5. A non-refundable \$25.00 application fee must accompany your application.
- 6. Initial registration fee and initial semester fee of \$80.00 should accompany your application.



## **UNDERGRADUATE APPLICATION**

CONSERVATIVE THEOLOGICAL UNIVERSITY 12021 Old St. Augustine Road Jacksonville, FL 32258 1-800-GO-BIBLE (Admissions Only) Attach
Photo
Here
(Photo must
Accompany
Application)

# Application for Admission (Please Print or Type)

Personal Information						
Name (last, first, middle)		Alias/ľ	Alias/Nickname/Maiden name			
Home Address	100 miles		No.			
City		State		Zip	Code	
Current Mailing Address (if different						
City		State		Zip	Code	
Home Phone ( )	Cell Phone ( )	0.2	E-Mail	N. Contraction of the Contractio		
Date of Birth						
Place of Birth						
		Is your spouse applying or currently attending CTU?				
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Church	Address _	State _	// 🔯		ode	
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Church City Name of pastor Date of membership	Address _	State _	Phone (		ode	
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Program Information What program of study are you appl What Major(s) are you considering?  Institute Studies  Associate of Arts	Denominational Denomi	State	For warees do you wan application)  Doctor Doctor Doctor	hat semest wish to earn of Ministry of Theolog	er? ? / / / / // Philosophy	

Will you be applying for a Scholarship/Grant/Financial Aid? Yes \_\_\_\_\_ No\_\_\_\_\_ Explain if yes: (separate sheet)

Will you be applying for Prior Learning Assessment (PLA) credit? \_\_\_\_\_\_



## UNDERGRADUATE APPLICATION

### Ministerial/Employment Information

re you a Minister of the Gospel? (Y/N)		Certification (if relev	rant) Ordained	Licensed	Commissione
	Include all		RIAL EXPERIENCE itions and activities, includ	ing supply work,	
Church/Institutio			Jse a separate sheet if ned ocation Dates	Contact Pers	on Phone
Employer	Positio	1.574500	RELATED EMPLOYMENT Dates	Supervisor	Phone
Educational Information Educational experience, inc Have you applied to another				y, and professional tr	raining.
School/Institution	State	Years Attended	Credits Earned	Graduation	Degree Earned
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	2			2	
Purpose Essavs	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9511	2	

What are your Vocational/Ministerial goals? (use a separate sheet if necessary)

How do you understand your call and/or commitment to Christian Ministry/Vocation? (Use a separate sheet if necessary.)

What is your purpose in seeking this program of study? (use a separate sheet if necessary)

## **Application Information**

Application for Admission will be considered upon the satisfactory completion and remittance of the following:

- 1. Completed printed or typed application in ink with appropriate non-refundable application fee. (See fee schedule.)
- 2. Signed and dated Statement of Faith form.
- 3. Recommendation & Character Reference from your Pastor or others.
- Two other Character references from those who know you well. (You are responsible for securing these references.)
- 5. Official Transcripts from each academic institution attended. (You must request these to be sent to CTU)

Send application package and correspondence to:

Office of Admissions **Conservative Theological University** 12021 Old St. Augustine Road Jacksonville, FL 32258

certify that the information provided to Conservative Theological University is accurate and truthful and that I have read the Conservative Theological
Iniversity online catalog and understand the regulations governing Conservative Theological University. I am in agreement with the policies and
standards of Conservative Theological University and am willing to uphold them and live by them if I am accepted as a student at Conservative
Theological University. I further acknowledge that no other representations have been made to me in writing, electronically, or orally other than what is
stated in the Conservative Theological University online catalog.

Date:

Signature: \_\_