

GRADUATE APPLICATION

Ministerial/Employment Information

e you a Minister of the Gospe	el? (Y/N)	Certification (if releva	ant) Ordained	Licensed	Commission
		MINISTERI	IAL EXPERIENCE		
			tions and activities, includi		
			se a separate sheet if nec		
Church/Institution		Position Lo	ocation Dates	Contact Perso	on Phon
Employer	Position		ELATED EMPLOYMENT Dates	Supervisor	Phone
Employer	Position	Locatio	II Dates	Supervisor	Pilotie
		711	eologi		
cational experience, inc	lude high scho r Bible college State	ool, college, university, or Seminary? Years Attended	graduate school, seminar If so, which one? Credits Earned	y, and professional tra	
cational experience, incle you applied to another	r Bible college	or Seminary?	If so, which one?		
cational experience, include you applied to another	r Bible college	or Seminary?	If so, which one?		
ucational experience, include you applied to another	r Bible college	or Seminary?	If so, which one?		Degree Earned
ucational experience, include you applied to another	r Bible college	or Seminary?	If so, which one?		
ucational experience, inc ve you applied to another School/Institution	r Bible college	or Seminary?	If so, which one?		
ucational experience, include you applied to another School/Institution rpose Essays	State State	Years Attended Years Attended	If so, which one? Credits Earned		
ave you applied to another	State State	Years Attended Years Attended	If so, which one? Credits Earned		

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.
- 4. 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
tandards of Conservative Theological University and am willing to uphold them and live by them if I am accepted as a student at Conservative
heological University. I further acknowledge that no other representations have been made to me in writing, electronically, or orally other than what is
tated in the Conservative Theological University online catalog.
······································

Date:

Signature: _



GRADUATE 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/Nickname/Maiden name			
Home Address					
City			Z	ip Code	
Current Mailing Address (if different	from above)	On:			
City					
Home Phone ()	Message Phone (E-Mail		
Date of Birth					
Place of Birth					
Name of Spouse (if applicable)		s your spouse appl	lying or currently atte	nding CTU?	
Church Information Date and details of your Personal Te	estimon <mark>y of</mark> Salvation (use se	parate sheet if nec	cessary)		
	HILLAR	THE PARTY OF THE P			
Name and mailing address of the ch	urch where you are currently	an active member			
Church	Address				
Church	Address			Code	
Church	Address	State			
ChurchCityName of pastor	Address	State	Zip		
Church City Name of pastor Date of membership	Address	State	Zip		
Church City Name of pastor Date of membership Program Information	AddressDenominational a	State	Zip Phone ()		
Church City Name of pastor Date of membership Program Information What program of study are you apply	Address Denominational a ying for? Select	State affiliation One Below:	Zip	ster?	
Church City Name of pastor Date of membership Program Information What program of study are you apply	Address Denominational a ying for? Select	State affiliation One Below:	Phone () For what semeses do you wish to ear	ster?	
Name and mailing address of the ch Church	Address Denominational a ying for? Select	State affiliation One Below:What degree	Phone () For what semeses do you wish to ear	ster? m?	
Church	Address	State affiliation One Below: What degree	For what semeses do you wish to ear	ster? rn? ry	
Church	Address	State affiliation One Below: What degree	For what semeses do you wish to ear oplication) Doctor of Ministration Doctor of Biblica	ster? m? ry ogy al Philosophy	
Church	Address	State affiliation One Below: What degree	For what semeses do you wish to ear	ster? m? ry ogy al 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?



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 122 through 123. (See www.conservative.edu catalog link)

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

If you are applying for any master's degree programs please complete "all" forms on pages 122 through 123.

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.



CATALOG 2014 - 2016

