



SOLAS
THEOLOGICAL
SEMINARY

Application Form

Master of Arts in Religion

Instructions

Please complete *all* sections in the application form; type your answers into each corresponding field and save the file. The completed form, along with all supporting documents, must be e-mailed to: **admissions@solasseminary.com**.

The Pastoral and Personal Reference Forms must be completed and e-mailed directly to *admissions@solasseminary.com*. Please ensure that the applicant's full name is mentioned on the form and in the e-mail subject line *exactly* as it is on this application form.

Section I: Personal Information

First Name(s):			
Last Name:			
Preferred Name:		Gender:	
Date of Birth:		Citizenship:	
Current Address:			
Permanent Address:			
Email:		Phone:	

Emergency Contact

Name:		Phone:	
Relationship:		Email:	

Section II: Family & Background

Marital Status:

Children:

Names of
Spouse &
Children (if
applicable):

Is your family in agreement with your desire to study?

☐ Yes

☐ No

Are your church elders in agreement with your desire to study?

☐ Yes

☐ No

Do you agree with our statement of faith?

☐ Yes

☐ No

What are your plans for the future with a Solas degree, if any?

Section III: Academics

Please fill out the following information for the institution from which you obtained your high school certificate:

Name:

City & State:

Year Graduated:

Please fill out the following information for the institution from which you obtained your bachelors degree:

Name:

City & State:

Degree
Obtained:

Year Graduated:

Please fill out the following information for the institution from which you obtained *any other educational qualification*:

Name:

City & State:

Degree
Obtained:

Year Graduated:

*Please note: attested copies for *each* of the certificates mentioned above must be included in your application.

Other Languages Studied

i.	<input type="text"/>	Years of Study:	<input type="text"/>
ii.	<input type="text"/>	Years of Study:	<input type="text"/>
iii.	<input type="text"/>	Years of Study:	<input type="text"/>
iv.	<input type="text"/>	Years of Study:	<input type="text"/>

Section IV: Work Experience

Please complete the following section for all past and present work experience, beginning with the most recent first.

1.

Title:

Company:

Start Date:

End Date:

Reason for end of employment:

2.

Title:

Company:

Start Date:

End Date:

Reason for end of employment:

3. Title:

Company:

Start Date: End Date:

Reason for end of employment:

4. Title:

Company:

Start Date: End Date:

Reason for end of employment:

Section V: Church Background

Please fill out the following information for your current membership:

Name & City of Church:

Presbytery/Associations:

Denomination: Years in Attendance:

Please fill out the following information for any previous membership:

Name & City of Church:

Presbytery/Associations:

Denomination: Years in Attendance:

Please fill out the following information for any previous membership:

Name & City of Church:

Presbytery/Associations:

Denomination: Years in Attendance:

Section VI: Personal Statement

Please use the space below to share your testimony and personal statement of faith, approximately 500-700 words.

Section VI: References

Please ensure that the information provided below matches that of the references provided.

Pastoral
Reference:

First Name(s):

Last Name:

Church:

Email:

Phone:

Personal
Reference:

First Name(s):

Last Name:

Relationship:

Email:

Phone:

Please indicate all supporting documents that will be sent in addition to this form:

- ☐ Attested copy of High School certificate
- ☐ Attested copy of Bachelor's Degree certificate
- ☐ Attested copy of additional educational certificates (if applicable)
- ☐ Pastoral Reference Form
- ☐ Personal Reference Form

Declaration:
By submitting this application, I confirm that the information provided is accurate, truthful and complete.

Full Name
or
Digital Signature