



COLLEGE OF THEOLOGICAL & INTERDISCIPLINARY STUDIES

Main Campus

Lot 17 & 18 Twickenham Park,
Spanish Town P.O.
St. Catherine
[Tel:8763178396](tel:8763178396)
Email:ctistheology@gmail.com

May Pen Extension

Hastings Academy
8 Convent Avenue
May Pen, Clarendon
Telephone:8769951003

Montego Bay Extension

First Church of the OB
1 Dome Street/Water Lane
Montego Bay, St. James
Telephone:8762935716

APPLICATION FORM - 2023/2024 Academic Year

A. PERSONAL DATA

Affix passport size photo

1. **Name:** _____
Surname *First Name* *M.I.*
2. **Date of Birth** (dd/mm/yyyy) _____ **Gender** _____
3. **Marital Status:** Single Married Separated
 Divorced Widowed Common Law
4. **If married, how long?** _____
5. **Current Disability** (if any) _____
6. **Permanent Address** _____

Mailing Address (if different from permanent address) _____

- Contact:** Mobile # _____ WhatsApp # _____ Home # _____
Work # _____ Email: _____
7. **Dependents:** Yes No, If yes, how many? _____ Nature of relationship _____

8. Emergency Contact:

Name	Relationship	Contact #

9. **Employment status:** Employed Seasonal Employment Self-Employed Unemployed.

Current Place of Employment & Address: _____

Start Date: _____

Current Occupation/Job Title: _____

Who will be responsible for your tuition if accepted? Self Church Sponsorship

A. EDUCATION BACKGROUND & QUALIFICATIONS

Tertiary Institution Attended	Course/Programme of Study	Results/Award	Period (From – To)

Secondary Institution Attended	Subjects passed	Results/Award	Period (From – To)

B. PROGRAMME OF STUDY - Selection and Preferred Mode of Study

Programmes – Part-Time (Monday to Fridays except for Tuesdays)	Mode of Study
Bachelor of Theology (4 years including summers) <input type="checkbox"/>	<input type="checkbox"/> Face to Face only
Associate Degree in Theology (3 years, 2 summers) <input type="checkbox"/>	<input type="checkbox"/> Online and Face to Face
Diploma, Biblical & Pastoral Studies (3 years) <input type="checkbox"/>	<input type="checkbox"/> Online only. Please share any specific reason why
Diploma, Biblical Studies & Counselling (3 years) <input type="checkbox"/>	online only? _____
Diploma, Counselling (3 years) <input type="checkbox"/>	_____
Certificate, Biblical Studies (1 year) <input type="checkbox"/>	_____
Certificate, Counselling (1 year) <input type="checkbox"/>	_____
2-Year Certificate, Biblical Studies (for persons without the required # of CXC's and ministry experience) <input type="checkbox"/>	_____

C. CHURCH AFFILIATION

Are you a Christian? Yes No. If Yes, how long _____

Are you a member of a Church? Yes No. If Yes, please complete the information below:

(a) Name of Church _____
Address: _____
Telephone: _____

(b) Name of Pastor _____
Telephone: _____

Ministry involvement at Local Church or religious group: _____

D. REFERENCES (Give the names & Contact info for 3 references. One, must be your Pastor)

Name	Address	Contact
		Tel: Email:
		Tel: Email:
		Tel: Email:

NB. Each of your references will be required to complete a referral form (per attachment). This form is to be submitted under confidential cover along with your application form.

E. PERSONAL STATEMENT/TESTIMONIAL

Write a brief testimonial overleaf of your personal conversion to Christ, your spiritual growth and development, your present walk with the Lord, and why you wish to attend Bible School.

DECLARATION

- I certify that the information provided on this application is to the best of my knowledge accurate.
- I understand that falsifying information may result in disciplinary actions or make me ineligible for admission to the College of Theological & Interdisciplinary Studies.

Signature: _____

Date: _____

***** IMPORTANT *****

IT IS MOST NECESSARY THAT WE HAVE ALL DOCUMENTS ON FILE BEFORE ANY ENTRANCE EXAMS OR ACADEMIC COMMITTEE INTERVIEWS ARE DONE. PLEASE USE THE FOLLOWING CHECKLIST TO ENSURE THAT YOUR SUBMISSION HAS ALL THE REQUIRED DOCUMENTATION

1. Completed application form
2. Completed Referral Forms
3. Passport size photo
4. Copies of educational qualifications
5. Copy of Birth Certificate

N.B. Please address all correspondence to

The Principal, College of Theological & Interdisciplinary Studies
Lot 17 & 18 Twickenham Park
St. Catherine

END OF APPLICATION

FOR OFFICIAL USE ONLY

Documents Submitted: <input checked="" type="radio"/> Complete application <input type="radio"/> Three referral forms <input type="radio"/> Passport size photo <input type="radio"/> Copy of birth certificate <input type="radio"/> Copy of Qualifications			
Entrance Examination required	Yes		No
Application Review Outcome	Accepted	Rejected	Provisional Acceptance
Comment: 			
Date of entrance exam:	Interviewers name & signature:		
Date of interview:	1. _____		
	2. _____		
	3. _____		

