



TENNESSEE SCHOOL OF RELIGION

1666 E. Raines Rd

Memphis, TN 38116

(901) 332-9522

APPLICATION FOR ADMISSION

Information contained in the application will be held in strict confidence. Misleading or withheld information may lead to disqualification. Your application will not be processed until the application fee is received. Please send your completed packet to the above address. The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records.

NAME

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DATE OF APPLICATION

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DATE OF EXPECTED ENROLLMENT

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APPLICATION FEE - \$25 (non-refundable)

PROGRAM: (CHECK ONE)

☐ Diploma of Theology

☐ Bachelor of Theology

☐ Master of Theology

Complete all items in this application, attaching additional pages if necessary. Please be sure that all required documents are submitted with your application. Contact the Admissions Office if you have questions or need assistance. When all application materials have been received, we will contact you.

Tennessee School of Religion does not discriminate on the basis of race, gender, ethnic background, native language, nationality or physical disability.

PERSONAL INFORMATION

NAME _____ SOCIAL SECURITY # _____
FIRST MIDDLE LAST

PRESENT ADDRESS _____
STREET CITY STATE

ZIP

PHONES: HOME _____ WORK _____ CELL _____
Include area code

E-MAIL: _____

GENDER: ☐ FEMALE ☐ MALE

ETHNICITY
☐ BLACK (AFRICAN AMERICAN) ☐ WHITE ☐ ASIAN ☐ HISPANIC OTHER _____

DATE OF BIRTH: _____ AGE: _____

EMERGENCY CONTACT NAME

NAME _____
FIRST MIDDLE LAST

CONTACT PHONE _____ RELATIONSHIP _____
Include area code

CONTACT ADDRESS _____
STREET CITY STATE ZIP

MARITAL STATUS/FAMILY INFORMATION

SINGLE ☒ MARRIED ☒ DIVORCED ☒ WIDOW

NAME OF SPOUSE _____
FIRST MIDDLE LAST

CHILDREN _____
Please provide name(s) and age (s)

ACADEMIC BACKGROUND

Please list all schools attended from high school to present

SCHOOL	MAJOR	DATES OF ATTENDANCE	GRADUATION DATE	TYPE OF DEGREE GRANTED OR EXPECTED

EMPLOYMENT

COMPANY NAME _____ JOB TITLE _____

PRESENT ADDRESS _____
STREET CITY STATE ZIP

WORK TELEPHONE _____
Include area code

MEDICAL INFORMATION

Do you consider yourself to be in good health? ☐ YES ☐ NO

When was your last complete physical? _____

Have you had any major illnesses? ☐ YES ☐ NO

If yes, please list and give dates? _____

Are you currently on medication or under a physician's care for physical issues? ☐ YES ☐ NO

If yes, please list physical condition. _____

Physician's Name: _____ Phone #: _____

CHURCH AFFILIATION/ CHRISTIAN INFLUENCE

DENOMINATION _____

CHURCH AFFILIATION _____

ADDRESS _____

BAPTISM _____
DATE PLACE

ARE YOU: ORDAINED? ☐ YES _____ ☐ NO SEEKING ORDINATION? ☐ YES ☐ NO
DATE

HAVE YOU CONSULTED WITH YOUR DENOMINATIONAL AUTHORITY ABOUT ATTENDING SEMINARY? ☐ YES ☐ NO

Please list three Christian books (do not include the Holy Bible) that have most influenced your life. Please provide title and author.

TITLE	AUTHOR
1.	
2.	
3.	

REFERENCE FORMS

Two (2) references are required for your application. Please use the provided Reference Forms and make sure you complete the applicant portion before delivering to reference.

- References must be individuals who have known you well for at least one year.
- One reference must be your pastor or another leader in your church.
- Individuals who are related to you by blood or marriage should not be references.
- Have both reference forms returned to you in signed and sealed envelopes to be included with your application.

ESSAY QUESTIONS

Personal Life - On a separate sheet of paper, please type a brief statement (2-3 paragraphs, double spaced) describing the following:

1. Personality
2. Personal Strengths
3. Personal Weaknesses
4. Relationships with others
5. Spiritual Gifts

Spiritual Life - On a separate sheet of paper, please answer the questions below (typed, double spaced):

1. Please describe your salvation experience. How did you become a Christian (include an approximate date).
2. Please describe your current relationship with the Lord in terms of your devotional and prayer life.
3. What is your current church involvement?
4. Why do you desire to attend Tennessee School of Religion, and how do you see it enhancing your present spiritual life and future ministry plans?

Statement of Faith On a separate sheet of paper, please type a brief statement (500 words, double spaced) of your belief regarding the following topics:

1. The Trinity (God, Jesus Christ, Holy Spirit)
2. Sin
3. The Scriptures
4. Salvation
5. Baptism of the Holy Spirit
6. Eschatology (End Time Events)/The Rapture/Millennial Kingdom
7. Eternal Security

TERMS AND CONDITIONS OF ENROLLMENT

Read the following terms and conditions of enrollment, initial each section and sign and date the bottom of the page.

Financial Responsibility

I understand that my tuition is due and payable prior to enrollment. *Payment arrangements may be arranged through the Registrar's Office (with approval by the President).*

Initials: _____

Policies and Procedures

I have viewed, read, and I now understand and agree to be subjected to the policies and procedures of the student catalog.

Initials: _____

Signature		Date	
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Your signature indicates that the information you have provided in this application is accurate and true.

OFFICE USE ONLY

Date Application Received _____

Please check all that have been received:

☐ Admission Fee ☐ High School Transcript ☐ College Transcript(s) ☐ Essay Questions ☐ Reference Forms

Accepted *(Date)* _____ Pending *(Date)* _____ Rejected *(Date)* _____

ADVISOR _____