## Christ Theological Seminary

## National and International

(P.O. Box 642-S. • Yonkers, New York, U.S.A. E-mail: easterntc7@gmail.com • (914) 376-2904



## APPLICATION FOR ADMISSION

			(Affiliat	e School)			
	Semester:		Fall 20		Spring 20	_	
Name: _							
		(Last, Fin	rst, Middle, Profe	essional or Reli	igious Title)		
Address: _			(5,	G. ( 7')			
			(Street, City	y, State, Zip)			
Telephone:	( )(Reside		( ).		(	)	
	(Reside	ence)		(Busine	ess)	(	Cell)
Birth Date:	(Month/Day/Year)	,		_,	······································		
	(Month/Day/Year)		(City)	(State	e or Province)	(Natio	on)
	rity # High School, Gra			uate	Attach Rec Photogra		
N	Name of Institution			Address		Date Attended	
CER	TIFICATES/DIP	LOMAS	/DEGREES/A	WARDS: Ac	ademic, Religio	us, Professi	onal
Но	onor Awarded/Ear	ned	Grantin	ng Institution	Organization/		

ELIGIOUS and / or PROFESSIONAI  Licenses							
2.001.50							
EFERENCES: (List 3: Give Name, Ad	ldress, Occupation)						
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IOW DID YOU HEAR ABOUT CHRIST THEOLOGICAL SEMINARY?							
CURRICULUM REQUIREMENTS: (Check below)							
	Graduate □ Post-Graduate □ Professional □						
Lay Worker   Undergraduate   Permission is granted by applicant to v							
Lay Worker D Undergraduate D Permission is granted by applicant to v	verify all information)						
Lay Worker □ Undergraduate □							