



PO Box 7148 • Greensboro • NC • 27417

Attach
Photo
Here

Doctor of Ministry Application for Admission

Personal Information

1. Mr. Mrs. Ms. _____
Last Name First Middle
2. _____
Street Address Mailing Address (if different)

City State Zip Code
3. _____ U. S. Citizen: Yes No
Date of Birth Place of Birth Social Security
- If you answered no, please indicate the country of your citizenship and INS status: _____
4. Home Phone: _____ - _____ - _____ Work Phone: _____ - _____ - _____ Email: _____
5. Gender: Male Female Race: _____
6. Marital Status: Single Engaged Married Separated Divorced Widowed
Spouse's Name: _____ Married Since: _____
Children at Home: _____
7. In case of emergency, contact: _____
Relationship: _____ Phone: _____ - _____ - _____
8. Are you a veteran? Yes No If yes, branch and rank: _____
Are you eligible for Veterans Administration benefits? Yes No
9. Current Employer: _____
10. Employer's Address: _____
11. May we publish your name, address, phone number, and email address in the **CEDS** Student Directory?
 Yes No

Ministry Information

12. Church Membership: _____
Denomination (Official Name): _____
13. Ministerial Status: Under Care Licensed Ordained Recorded Date: _____
14. Name of body granting recognition: _____
15. Current Ministry: _____
_____ Location _____ Since _____
16. Future Ministry Plans: _____

Academic Information

17. When would you like to begin your DMin studies at **CEDS**? Academic Year: _____
 Session A (July) Session B (November) Session C (April)
18. Have you applied to **CEDS** previously? Yes No
If yes, give dates: _____
19. Have you been refused admittance or re-admittance by a school? Yes No
If yes, please explain: _____

20. List below in chronological order **ALL** schools attended after high school. **Applicant is responsible for having OFFICIAL TRANSCRIPTS forwarded by ALL colleges, universities, graduate schools, and seminaries to CEDS.**
- | <u>Name of Institution</u> | <u>Location</u> | <u>Dates Attended</u> | <u>Degree</u> |
|----------------------------|-----------------|-----------------------|---------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
21. Check here if you would like a transcript evaluation for possible transfer credit.

Financial Information

22. Have you experienced extreme financial difficulties, been insolvent, or declared bankruptcy?

Yes No If yes, please explain on a separate page.

23. How will you finance your divinity school education?

- | | | |
|---|--|---|
| <input type="checkbox"/> Personal Savings | <input type="checkbox"/> Local Church Assistance | <input type="checkbox"/> Student Loan Program |
| <input type="checkbox"/> Full or Part-time Employment | <input type="checkbox"/> Denominational Scholarship | <input type="checkbox"/> Grants |
| <input type="checkbox"/> Working Spouse | <input type="checkbox"/> Divinity School Scholarship | |
| <input type="checkbox"/> Extended Family Support | <input type="checkbox"/> Veterans Benefits | |

References

24. Four recommendations (use provided forms) attesting to the applicant's ability to do doctoral work.

Name

Address

Denominational

Executive: _____

Current

Ministry: _____

Former

Professor: _____

Personal

Friend: _____

Essay

25. Submit a ten page essay which includes: (1) a thoughtful reflection on your conversion and growth into the image of Christ, (2) a description of your call to ministry, (3) a resume of all ministry positions and/or opportunities, (4) an honest assessment of your ministry experiences, (5) a summary of your reasons for pursuing DMin studies and the effects you see the studies having on your life and ministry, and (6) a statement of family (spouse and children) support.

26. I have made arrangements to take the *Millers Analogies Test* (MAT).

27. I have attached a passport size photo to the application.

28. I have enclosed the nonrefundable \$50 Application Fee.

29. I certify that all information on this application is true and accurate to the best of my knowledge.

30. Signature: _____ Date: _____

Carolina Evangelical Divinity School complies with applicable laws regarding non-discrimination based on factors such as race, sex, national origin, age, or disability in its educational and employment policies.