



**Reformed
Episcopal
Seminary**

826 Second Avenue
Blue Bell, PA 19422
Telephone: 610-292-9852
Facsimile: 610-292-9853
admissions@reseminary.edu

**APPLICATION
FOR
ADMISSION**

APPLICATION CHECKLIST

The following items are required in the application process. To avoid delays in the application process, please check off each item as it is completed. All information should be submitted to the Seminary Admissions Office at the above address.

- | | |
|--|--|
| <input type="checkbox"/> Application | <input type="checkbox"/> Non-refundable application fee- \$50 for American students, \$85 for international students |
| <input type="checkbox"/> Official college or high school Transcripts (request forms submitted) | <input type="checkbox"/> Three letters of recommendation. One should be from your pastor (forms supplied). |
| <input type="checkbox"/> Personal statement (at least 500 words) describing your life of Christian discipleship and sense of God's vocation for your life, | <input type="checkbox"/> International students attach a copy of your passport or other travel documents |

PERSONAL INFORMATION

Name _____ Social Sec.# _____ - _____ - _____ Sex: Male Female
Last First Middle

If your name now differs from the name appearing on any of the documents which support this application, place the name used on the line below.

Name _____ Date of Birth ___/___/___ Day Phone: () _____ - _____
Last First Middle Home Phone: () _____ - _____

Email Address: _____

Present Mailing Address: _____

City, State, Zip Code: _____

Permanent Mailing Address (if different from above) _____

Ethnic origin (optional)

- | | | |
|--|--|---|
| <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> Asian, Pacific Islander | <input type="checkbox"/> American Indian/Alaskan Native |
| <input type="checkbox"/> White/ non-Hispanic | <input type="checkbox"/> Hispanic | Country of Citizenship: _____ |
| <input type="checkbox"/> Two or More Races | <input type="checkbox"/> Undisclosed | |

If you are an international student, please indicate your current Visa status: _____

Marital Status (optional): circle one: Single Married Separated Divorced Widowed

Spouse's Name: _____ Number of Dependent Children: _____

Enrollment Information

Applying as: New Student Transfer Student

Planning to attend: Full Time Part Time Day Evening

Have you previously applied to Reformed Episcopal Seminary? Yes No

Expected date of entrance: _____

Veteran status: Are you a US veteran? Yes No

If yes, do you plan to use your VA benefits at RES? Yes No

Program for which you are applying:

Master of Divinity (three years)

Certificate (one year)

LDM

How were you influenced to apply to Reformed Episcopal Seminary?

All full and part time students taking more than twelve (12) credits are required to provide three references, one of which must be that of your pastor. If you are a pastor, please supply a reference from someone who is in authority over you. Reference forms are provided for your convenience.

Please list those who will be supplying those references:

Name: _____ Relationship: Pastor/_____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Ecclesiastical Status

Your denomination? _____ Are you ordained? _____ Office? _____

If not ordained, are you planning to seek ordination? _____ By what body? _____

Local church membership _____

Street address: _____

City, state, zip code: _____

Name of Pastor _____ Pastor's phone (____) _____

EDUCATIONAL BACKGROUND

Please list all colleges, universities, graduate and professional school attended beyond high school, starting with the most recent. If there is insufficient space below, please attach an additional sheet. *It is your responsibility to see that official transcripts are sent directly to the Seminary Admissions Office by every school you have attended since high school.*

School	Major	Dates of Attendance	Degree Awarded

If you do not feel your transcript(s) provide the Admissions Office with an adequate portrait of your abilities, provide an explanation in the space provided below.

High school: _____ Date graduated: _____

Address: _____

If you do not hold a high school diploma, do you hold a GED? Yes No Date passed: _____

Have you ever been suspended or dismissed from any school? Yes No If yes, explain below:

Do you have any health concerns (personal or family), which might have an impact on your seminary training? (optional)

ACTIVITIES AND INTERESTS

Please list extracurricular and/or avocational activities, if any, in which you participate(d):

Please list church or campus ministry activities, if any, in which you participate(d):

Please list any honors you have received, and briefly state the significance of the award:

ACTIVITIES (continued):

Please list your hobbies and other interests:

EMPLOYMENT

Please list jobs you have held, starting with the most recent. Include military experience, homemaking, and volunteer work. Briefly describe your responsibilities and your contributions in each position. If available, please attach a copy of your most recent resumé.

Employer: _____ Dates: (mo/yr) _____ to _____

Position held: _____ Hours per week: _____

Responsibilities and contributions: _____

Employer: _____ Dates: (mo/yr) _____ to _____

Position held: _____ Hours per week: _____

Responsibilities and contributions: _____

Employer: _____ Dates: (mo/yr) _____ to _____

Position held: _____ Hours per week: _____

Responsibilities and contributions: _____

PERSONAL STATEMENT

On a separate sheet of paper, write a brief (at least 500 words) statement describing your Christian experience, sense of religious vocation, and reasons for seeking seminary training. If you do not have a baccalaureate degree, please submit a five (5) page essay on any Biblical theme.

ADDITIONAL INFORMATION

If you wish, please use a separate sheet to include any additional information about yourself and your application to Reformed Episcopal Seminary which would help the Admissions Office in considering your application.

APPLICATION

I hereby make application to Reformed Episcopal Seminary and affirm that, to the best of my knowledge, all information is complete and accurate. I understand that my application must be accompanied by a non-refundable \$50.00 fee (\$85 for international students).

Do you agree to test every question according to the teaching of Holy Scripture?

Yes No

_____/_____/_____
Signature Date