



ERSKINE
 THEOLOGICAL SEMINARY
Serving Christ and His Church

ADMISSIONS APPLICATION

(Term) _____

Full Legal Name (PRINT) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Email _____ Telephone _____

Date of Birth _____ Social Security Number * – Someone in admissions will call you.

| | | | |
|--|-----------------------------|--|---------------------------------------|
| | MA in Practical Ministry | | |
| | MA in Theological Studies | | Diploma in Practical Ministry |
| | Master of Divinity (MDiv) | | Diploma in Theological Studies |
| | MDiv in Chaplain Ministries | | Diploma in Divinity |
| | Master of Theology (ThM) | | David Livingston Graduate Certificate |
| | Doctor of Ministry | | |

The following information is optional and is not required for an admission decision. Please check all that apply.

| Applicant Status | | Ethnic Group | |
|--------------------------|------------------------------|--------------------------|------------------------|
| <input type="checkbox"/> | New student | <input type="checkbox"/> | African American |
| <input type="checkbox"/> | Returning student | <input type="checkbox"/> | American Indian |
| <input type="checkbox"/> | Transfer student | <input type="checkbox"/> | Asian/Pacific Islander |
| <input type="checkbox"/> | Boarding student (dormitory) | <input type="checkbox"/> | Hispanic |
| <input type="checkbox"/> | Commuting student | <input type="checkbox"/> | Multi-racial |
| <input type="checkbox"/> | Online student | <input type="checkbox"/> | White |
| <input type="checkbox"/> | | <input type="checkbox"/> | Other |

Demographics

Gender Male Female

Marital status Single Married Widowed

 * Social security number is required for admission. Someone in admissions will call you and input that information directly into our secure management system.

Education

| College and/or Graduate School | Location | Dates of Attendance | Degree Earned |
|--------------------------------|----------|---------------------|---------------|
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Church Relationships

Exact name of your denomination _____

Name of your local congregation _____

Name of your presbytery, conference, or association _____

Student Loan History

Have you ever received a federal student loan? ____ Yes, _____ No

Do you currently owe on a federal student loan? ____ Yes, _____ No

Are you currently in default or delinquent on any Title IV loans from Erskine or another institution?

_____ Yes, __ No

References – list of persons who know you well and can address your Christian character, commitment, etc.

| Reference name | Address | Telephone |
|----------------|---------|-----------|
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Certification Statement

By my signature, I hereby certify that the information listed above is factual and true. I further indicate my willingness to be a part of the Erskine Seminary community and indicate my willingness to conform to the standards of conduct as stipulated in the *Catalog* and *Student Handbook*.

Signature _____ Date _____

Download completed form to your computer and **Email** it to etsadmissions@erskine.edu.

Revised Aug-10-2022