



**APPLICATION FOR ADMISSION**  
 EDEN THEOLOGICAL SEMINARY  
 475 EAST LOCKWOOD AVENUE  
 SAINT LOUIS, MISSOURI 63119-3192  
 1.877.627.5652

**I. APPLICATION AND PLANS**

Full Name \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_  
(Last) (First) (Middle)

Permanent Address \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City and State) (Zip Code)

Temporary Address \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City and State) (Zip Code)

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_ U.S. Citizen  Yes  No

Denominational Affiliation \_\_\_\_\_

1. I hereby request:  admission as a Master of Divinity student  
 admission as a Master of Divinity/Master of Social Work student (Dual Degree)  
 advanced standing as a transfer student from \_\_\_\_\_ seminary

2. I wish to begin:  Fall Semester, \_\_\_\_\_ (year)  Spring Semester, \_\_\_\_\_ (year)

3. Do you expect to live in campus housing?  Yes  No

**II. PREVIOUS EDUCATION**

1. Name of Institution	Date of Attendance	Degree Received	Year	Degree Expected	Year
_____ <small>(High School or Academy)</small>	_____	_____	_____	_____	_____
_____ <small>(College or University)</small>	_____	_____	_____	_____	_____
_____ <small>(College or University)</small>	_____	_____	_____	_____	_____
_____ <small>(Theological Seminary)</small>	_____	_____	_____	_____	_____

2. Area of Concentration \_\_\_\_\_ Honors Received \_\_\_\_\_

**III. FAMILY DATA**

1. Please give name and phone number of person to be contacted in an emergency:

Name: \_\_\_\_\_ Phone # ( ) \_\_\_\_\_ work  
 \_\_\_\_\_

**III. FAMILY DATA (continued)**

2. Name of Spouse / Partner \_\_\_\_\_
3. Names, ages and gender of children \_\_\_\_\_
- \_\_\_\_\_

**IV. RELIGIOUS AFFILIATION**

1. Your Home Church \_\_\_\_\_
- Pastor's Name \_\_\_\_\_
- Street \_\_\_\_\_ Phone # ( ) \_\_\_\_\_
- City/State \_\_\_\_\_ Zip Code \_\_\_\_\_
2. I have been a member of this church for: \_\_\_\_\_ years
3. If you have been a member of this church for fewer than two years, what is your church history prior to this membership? \_\_\_\_\_
- \_\_\_\_\_

4. If you currently attend a church different than the one listed above:
- Name of Church \_\_\_\_\_
- Pastor's Name \_\_\_\_\_
- Street \_\_\_\_\_ Phone # ( ) \_\_\_\_\_
- City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

5. I attend this church because: \_\_\_\_\_

\_\_\_\_\_

6. Describe your involvement in church activities \_\_\_\_\_

\_\_\_\_\_

7. Are you in formal relationship with the denominational committee guiding your ordination process?  
 (i.e. in care, candidacy process)  Yes  No

Details/Comments \_\_\_\_\_

**V. EMPLOYMENT HISTORY**

Please list previous full-time employment positions beginning with the most recent position:

1			
	(Place of Employment)	(Position/Title)	(Dates)
2			
	(Place of Employment)	(Position/Title)	(Dates)
3			
	(Place of Employment)	(Position/Title)	(Dates)

**VI. CREDENTIALS, APPLICATION FEE, AND REFERENCES**

Please submit the following materials:

1. An official academic transcript of your undergraduate record.
2. An official academic transcript of seminary and/or university graduate work, if such work has been done. (Transcripts must be requested by student in writing from granting institution and sent directly to the Director of Admissions, Eden Seminary.)
3. A \$40.00 application fee.

Enclosed are three reference packets. Please review the reference form; complete your portion of the form by typing in your name, the degree program, and signing and dating the waiver statement on each form (also sign waiver statement below). Distribute these to the persons you have chosen as references. Your references should include a pastor (or judicatory person), a former or current professor, and one additional pastor or professor. Please do not include a relative among your references. If you are unable to obtain an academic reference, please contact the admissions office to arrange a time to write an academic essay. Indicate below the names of the persons to whom you have given reference forms. Before we can act on your application we will need to receive all three of your references. Your prompt action is essential to a timely decision.

Pastor: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 Professor: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 Pastor or Professor \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Under the provisions of the Family Rights and Privacy Act of 1974 (As amended), Sec. 438, and the Department of Education Regulations, Sec. 99.7(C), 99.12(a)(3), I voluntarily waive my right of access to the above (VI.,4), and any other letters of reference provided on my behalf, understanding that upon admission all letters of reference will be removed from my personal file and destroyed.

\_\_\_\_\_  
 (Signature) (Date)

**VII. ESSAY**

In a five page essay (approximately 1500-2000 words), the Admissions Committee wants to know who you are as a person of faith: Who is God for you and how has your understanding of God developed over the course of your lifetime? Use the following questions to guide you in developing your essay:

Which experiences and personal relationships have been most formative in your development as a person of faith?

What are your most significant involvements and experience in the Church?

What social issues are of the most concern to you?

What are the three most challenging books you have read and what was significant about each for you?

What has led you to decide to enter a theological seminary at this time?

What are your hopes for theological education at Eden Theological Seminary?

### VIII. FINANCIAL RESOURCES

Eden Seminary offers financial assistance to students through a variety of options.

Students eligible for Tuition grants (Heritage, Minority and Ecumenical) are notified upon admission to Eden. No form is needed at the time of application.

Instructions will be included in admission letters regarding the process to apply for other financial aid options such as need-based scholarships, denominational scholarships and Stafford Student Loans.

### IX. PRE-ADMISSION INTERVIEW

The Seminary reserves the right to request all applicants to visit the campus for a pre-admission interview. The intent of this interview is to become personally acquainted and to answer questions applicants may have concerning the Seminary or professional ministry. Upon receipt and processing of this application form, the Admissions Committee may designate a specific time for an interview.

Please provide suggested dates for the pre-admission interview \_\_\_\_\_

Before mailing, please make sure you have:

1.  Completed application form
2.  Enclosed \$40.00 fee
3.  Distributed reference forms
4.  Requested official academic transcripts be sent to Director of Admissions, Eden Seminary
5.  Provided essay

Applications cannot be acted upon until all requested items have been received by Admissions Office. A timely admissions decision depends upon your prompt and complete provision of all materials. All documents become the property of Eden Theological Seminary and are not returnable to applicant or to a third party.

Please send application and all requested items to: Director of Admissions, Eden Theological Seminary, 475 East Lockwood Avenue, Saint Louis, Missouri 63119-3192 314-918-2501 or 1-877-627-5652; Fax 314-918-2640; E-mail: cshanks@eden.edu.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Eden Theological Seminary is in full compliance with the Privacy Act of 1974 as Amended (Federal Law 93-380)