

100 East 27th Street, Austin, Texas 78705-5797 Phone: 512-404-4827 / 800-241-1085

admissions@austinseminary.edu / Fax: 512-472-7089

AUSTIN PRESBYTERIAN THEOLOGICAL SEMINARY

CERTIFICATE IN MINISTRY APPLICATION

Please Print or Type This Form.

IDENTIFICATION. MR. MS. MISS DR. REV. Full Name				Male	Femal	e
Preferred Name						
Address	City/State/ZIP					
Phone: Work (.)	Home ()			
Cell ()	E-mail				
Marital Status: Single	Married: Spouse's Name					
CHURCH RELATIONSHIP Church name and address	I am a member of a church					
)					
	f the following judicatory (as a 0				astoral lead	er).
EMPLOYMENT (We will not of Employer	contact employer for reference.					
Address	_ Supervisor	Supervisor				
OTHER IDENTIFICATION	Date of Birth	Place o	f Birth			
Citizenship U.S. C	Other (please indicate)					
INSTITUTION	LOCATIO	ON	А	ATTENDANCE DEGREE YEAR EARNED REC'D		
HIGH SCHOOL			FRO	ом то		, rade b
COLLEGE/UNIVERSITY			FRO	ом то		
					-	
GRADUATE/PROFESSIONAL SCHOOL,	SEMINARY		FRO	OM TO		
I seek admission to the Certi	ficate in Ministry Program begin	nning with the follow	ving:	•	-	

SIGNATURE DATE

ITEMS NEEDED TO COMPLETE APPLICATION:

A one-time application fee of \$25.00 (check or money order), must accompany initial application. This application fee is non-refundable.

All tuition charges must be paid in full at the time of registration and prior to the beginning of the term.

Certificate in Ministry applicants must complete a brief (20 minute) admissions conference. This may be conducted by phone, Skype, or in person.

Submit the completed Letter of Endorsement, signed by the appropriate member(s) of your session, church board, or institutional officials.

All applicants are required to complete a criminal history check, including driving records, through CastleBranch.com. To grant Austin Seminary access to your background check, enter our institution's package code (AU33) when you submit your information on-line. The cost for this service is the responsibility of the student. Note that charges and past offenses do not automatically disqualify an applicant. All records will be evaluated in context. Contact the Office of Admission for more information.

FOR OFFICE U	SE ONLY				
This student i	s is eligible to er	roll in courses tha	t are available and is ad	mitted as a Certificate Student for the:	
Fall;	Winter;	Spring;	term of the 20 20 academic year,		
Signature, Vice Pro	esident for Enrolli	nent Management		Date	
[Registrar/Date			/]	

Certificate in Ministry Letter of Endorsement

Rev. Jack Barden
Vice President of Enrollment Management
Austin Presbyterian Theological Seminary
100 E. 27 th Street
Austin, TX 78705-5797
Dear Rev. Barden,
This endorsement is made on behalf of, who serves as, who serves as, who serves as, where see appropriate of, where see appropriate of
(indicate lay pastor, elder, minister, deacon, other as appropriate)
(indicate lay pastor, elder, minister, deacon, other as appropriate) of (indicate church or institution).
He/she has discussed with us his/her desire to enter the Certificate in Ministry program at Austin Presbyterian Theological Seminary and has, in accordance with your admissions policies, requested that we endorse him/her in this new academic venture. We understand that the Seminary sees our church's (or institution's) endorsement as vital. By signature below, this letter attests to our endorsement of this applicant for participation in the Certificate in Ministry program at Austin Presbyterian Theological Seminary. We pledge to be as supportive in as many ways as we can in helping
process of appropriate discernment as to the ways in which this Certificate in Ministry program
will strengthen his/her leadership and service in ministry for the church and to the world.
Sincerely,
Signature
Printed Name
Title
Date