TRINITY THEOLOGICAL COLLEGE

(FORM-A)

Affiliated to the Senate of Serampore College (University)
Post Box -168, Thahekhu, Dimapur- 797112, Nagaland
Email: ttcweb1992@gmail.com
www.ttc.edu.in

A recent passport Photo

APPLICATION FOR ADMISSION

Academic Year _____

Admission sought for M.Th. in _____Department

☐ Old Testament ☐ New Testament ☐ Religion (Primal Religion)

Please fill the form in BLOCK LETTERS

1. PERSONAL PARTICULARS

☐ Male ☐ Female ☐ Single ☐ Married (Marriage certificate to be enclosed)

First Name (as per the academic record) :

Last Name :

Date of Birth :	Tribe:
Father's Name:	Occupation :
Mother's Name:	Occupation:

Permanent Address:

State:	Pin code:	Country:

Corresponding Address (provide proper postal address):

Student's Contact No.:

Parent's Contact No:	Email id:
Spouse Name (if married)	No. of Children:
Name of your Local Church:	Denomination:

Address of your Local Church :

Mother Tongue:

2. ACADEMIC RECORDS

i. List the subjects/papers of your B.D. degree course belonging to the M.Th. branch you are applying for:

Sl. No.	Name of the papers/subjects	Grade

ii. M.Th. qualifying paper of the Senate if any:

Sl. No.	Name of the papers/subjects	Grade

iii. Title of Thesis in your B.D Course:

iv. Synopsis of Thesis (about 150 words)

[separate sheet of paper to be used]

v. Have you published any article(s) or book(s) either in English or in a regional language? Yes/No If yes, give details and send a copy of the published material.

vi. Give any other relevant information regarding your academic journey/experience/performance:

[separate sheet of paper to be used]

3. MINISTRY AND LEADERSHIP ABILITIES:

Write in brief your ministerial experience and leadership abilities (letter from the employer to be enclosed)

[separate sheet of paper to be used]

4. Names and addresses of Three persons who can provide confidential information about you. These persons shall be:

a. Pastor of your church/ President/ Bishop /Executive Secretary of your association/ organization
b. Two Teachers under whom you studied your B.D.

Name:	**Designation:**
Phone no:	**Email:**
Address:	
Name:	**Designation:**

Phone no:	**Email:**
Address:	
Name:	**Designation:**
Phone no:	**Email:**
Address:	

FINANCE

PLEASE STATE THE SPONSOR FOR YOUR STUDIES

i. SELF/FAMILY/PARENTS
ii. GUARDIAN
iii. ASSOSCIATION/ORGANISATION
iv. CHURCH
v. OTHERS

(Financial guarantee letter by the sponsor to be duly filled and enclosed)

(FORM-B)

TRINITY THEOLOGICAL COLLEGE
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Post box- 168, Thahekhu, Dimapur-797112, Nagaland

FINANCIAL GUARANTEE FORM
Please fill the form in BLOCK LETTERS with blue or black pen

NAME OF THE STUDENT: _____

COURSE OF STUDY: _____ DURATION:_____

This is to confirm that_____ will financially sponsor the above named student for the full course study in Trinity Theological College.

POSITION/DESIGNATION/RELATION WITH THE STUDENT

_____
FOR/ON BEHALF OF (with seal of the organization/institution)

SIGNATURE:

(FORM-C)

TRINITY THEOLOGICAL COLLEGE

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MEDICAL FITNESS CERTIFICATE

Please fill the form in BLOCK LETTERS with blue or black pen

NAME:_____

BLOOD GROUP:_____EYESIGHT RIGHT/LEFT:_____

MEDICAL HISTORY:_____

KNOWN DISEASE:_____

KNOWN MEDICAL ALLERGIES:_____

PREVIOUS SURGERY (if Any):_____

GENERAL REMARKS:_____

I, Dr._____hereby certify that I have examined Mr. / Ms. _____ and cannot discover that he/she has any disease (communicable or otherwise), constitutional weakness or bodily infirmity except_____

I consider him/her physically and mentally fit/ unfit for studies as a residential student. His/ her age according to his/her statement is_____and by appearance about_____years.

DATE: PHYSICIAN'S SIGNATURE

_____ **SEAL** _____

PLACE NAME

DECLARATION

I,_____ hereby declare that the particulars given above are true to the best of my knowledge. I solemnly pledge before God and witnesses that I will abide by the rules and regulations of the college. I shall promote and maintain the spirit of unity and love within the institution, and I shall diligently pursue my studies to be well equipped for God's ministry.

UNDERTAKING BY THE CANDIDATE

i. I intend to study theology out of my own volition and take full personal responsibility for my actions and conduct.

ii. I declare that the college administration reserves the right in their judgment for any disciplinary action if my behaviour and doctrine is found to be contrary to the spirit and statement of the institution.

iii. Should I breach any college rules/regulations, the college reserves the right to take whatever action it deems appropriate without prior notice to my parents/guardians/sponsors.

iv. Any information to parents/guardians with regard to disciplinary action will be intimated through postal service.

v. I understand the Anti-Ragging Policy and the rules laid down by the college and agree not to engage in, encourage, or tolerate any form of ragging, whether inside or outside the college premises. I am aware that ragging is a punishable offence and if i am found involved in any form of ragging, i will face strict disciplinary or legal action, including suspension, expulsion, or cancellation of admission. I will promptly report any ragging incident I witness or learn about, and I commit to following all college rules to help maintain a safe and respectful environment.

I make this declaration voluntarily and with full awareness of its consequences.

SIGNATURE OF THE APPLICANT

_____

DECLARATION

I_____ (Name of parents/Guardian/Sponsor), parent/guardian

of _____ (Name of the Applicant), hereby declare that:

UNDERTAKING BY THE PARENT/GUARDIAN/SPONSOR

i. My/our ward intends to study theology out of his/her own volition and is responsible for his/her own actions.
ii. My/our ward is not enrolled/will not enrol in any other college/institution during his/her study at Trinity Theological College.
iii. My/our ward is not employed in any Government or private establishment.
iv. I/we declare that the college administration reserves the right in their judgment for any disciplinary action if my/our ward's behaviour or doctrine is contrary to the spirit and statement of the institution.
v. Should my/our ward breach any college rules/regulations, the college reserves the right to take whatever action it deems appropriate without prior notice to the parents/guardians/sponsors.
vi. Any information to parents/guardians/sponsors with regard to disciplinary action will be intimated through postal service.
vii. I/we understand the Anti-Ragging Policy and the rules laid down by the college and assure that my/our ward will not participate in, encourage, or tolerate any form of ragging, whether inside or outside the college premises. I/we are aware that ragging is a punishable offence and if my/our ward is found involved in any form of ragging, s/he will face strict disciplinary or legal action, including suspension, expulsion, or cancellation of admission. I/we commit to following all college rules to help maintain a safe and respectful environment.

I make this undertaking voluntarily and with complete understanding of my responsibility as a parent/guardian/sponsor.

_____

SIGNATURE OF THE PARENT/GUARDIAN/SPONSOR

WITNESS: PASTOR AND A MATURED PERSON

i. NAME:
CONTACT NO.: SIGNATURE

ii. NAME:
CONTACT NO.: SIGNATURE

Please read the checklist and tick before you submit to make sure you have enclosed all the required documents.

REQUIREMENT CHECKLIST

i. Duly filled and signed application form

ii. Personal testimony and commitment to service (about 200 words)

iii. Pastor's recommendation letter from the local church

iv. Recommendation letter from the Executive Secretary/ Bishop

v. Duly filled and signed financial guarantee form

vi. Duly filled and signed medical fitness certificate

vii. Letter from the employee (if previously employed)

viii. Reference forms to be filled and send to the college by the referees.

Photocopies of the following documents:

i. Mark sheet and Degree Certificate from the University

ii. Marriage certificate (if married)

FOR OFFICE USE ONLY

DATE OF ISSUE: _____

DOCUMENTS: **i. COMPLETE** **ii. INCOMPLETE**

APPLICATION FEE: **i. PAID** **ii. DUE**

DATE OF SUBMISSION:_____

NOTE

***Please make sure the form is correctly filled and all required documents and certificates enclosed.**

***Incomplete application will be REJECTED.**

***All original documents are to be produced during entrance test and admission**

***Rs. 300 to be paid during submission of forms.**

TRINITY THEOLOGICAL COLLEGE
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THAHEKHU, DIMAPUR

REFERENCE FORM FOR MASTER OF THEOLOGY (M.Th.) APPLICANTS

Instructions to the Referee: Please complete all applicable sections honestly and objectively. The completed form must be sent **directly to the Academic Office by the referee**, not through the applicant, as part of the admission process.

To: The Academic Office
Trinity Theological College,
Post Box - 168,
Thahekhu,
Dimapur- 797112
Nagaland
Email: ttcweb1992@gmail.com

APPLICANT'S INFORMATION

1. Full Name of Applicant: _____
2. Name of the Referee: _____
3. Designation/Position: _____
4. Name of Institution/Church: _____
5. Address: _____
6. Email Address: _____ Phone: _____

RELATIONSHIP WITH THE APPLICANT

1. In what capacity do you know the applicant?
   ☐ Teacher during the B.D. programme
   ☐ Pastor
   ☐ Other (please specify): _____
2. How long have you known the applicant? _____

ACADEMIC ABILITY AND RESEARCH POTENTIAL

Please assess the applicant in the following areas by ticking the appropriate box.

Criteria	Excellent	Very Good	Good	Average	Below Average	Unable to Assess
Analytical and critical thinking	☐	☐	☐	☐	☐	☐
Research and independent study skills	☐	☐	☐	☐	☐	☐
Written and verbal communication	☐	☐	☐	☐	☐	☐
Commitment to academic integrity	☐	☐	☐	☐	☐	☐
Readiness for advanced theological study	☐	☐	☐	☐	☐	☐

Additional comments (if any) on the applicant's academic ability and research potential:

PERSONAL, SPIRITUAL AND MINISTERIAL QUALITIES

Please assess the applicant in the following areas.

Criteria	Excellent	Very Good	Good	Average	Below Average	Unable to Assess
Personal integrity and honesty	☐	☐	☐	☐	☐	☐
Christian commitment and spiritual maturity	☐	☐	☐	☐	☐	☐
Sense of responsibility and discipline	☐	☐	☐	☐	☐	☐
Interpersonal relationships and cooperation	☐	☐	☐	☐	☐	☐
Openness to learning and correction	☐	☐	☐	☐	☐	☐
Leadership potential	☐	☐	☐	☐	☐	☐

Additional comments (if any) on the applicant's character, spiritual maturity, and suitability for theological study:

OVERALL RECOMMENDATION

How would you rate the applicant's overall suitability for admission to the M.Th. programme?

☐Highly recommended
☐Recommended
☐Recommended with reservations
☐Not recommended

REFEREE'S DECLARATION

I hereby certify that the information provided in this reference is true and accurate to the best of my knowledge. I understand that this reference forms part of the applicant's admission process for the Master of Theology (M.Th.) programme.

Signature of Referee: _____
Full Name: _____
Date: _____ Place: _____
Official Seal/Stamp (if applicable): _____

FOR OFFICE USE ONLY

Date Received: _____
Remarks: _____
Signature: _____