



FAITH THEOLOGICAL SEMINARY

JOTSOMA, KOHIMA, NAGALAND

Accredited by ATA

Recognized by H.Ed. Government of Nagaland

Email: fts@ftskma.com Website: www.ftskma.com

Contact: +917005119367

Mailing Address:

P.O Box- 431, Kohima 797001

Nagaland, India

APPLICATION FORM

Regular Study Courses are Accredited by ATA (M. Div., B.Th., Dip.Th.)

Please Tick (✓) the Programme for which Admission is Sought:

- Master of Divinity Regular Studies Distance Education
 Bachelor of Theology
 Diploma in Theology
 Certificate in Theology

Attach a
Recent
Passport Size
Photo

1. Name (**same with Documents**): _____
2. Date of Birth: Day _____ Month _____ Year _____
3. Gender: _____ Nationality: _____
4. Married or Single: _____
5. Your Identification Mark: _____
6. Permanent address: _____
7. Father's name: _____ Mother's Name: _____
8. Parent's Occupation: _____ Parent's Ph. No.: _____
9. Date of Believer's Water Baptism: _____

10. Qualification:

Level	Name of the Institution	Degree	Year	Grade	Remark
High School					
Higher Secondary School					
Diploma in Theology					
Graduate					
Master					
Others					

11. Which Local Church do you belong? _____
12. Have you engaged in any kind of Christian Service? _____
13. Have you received the Holy Spirit according to Acts2:4? _____
14. What is the state of your Health? _____
15. Will you be sponsored by some **Organization/ Church/ Individual/ Others?** _____
16. State here the Name & Address of the following:
- I. Your Church Pastor: _____ Ph. No.: _____
- II. A Responsible Christian Person _____ Ph. No.: _____

17. Documents to submit to FTS Office:

- 1. Original Documents Starting from Class 10 (refer to Sl. No. 10) with two Xerox copies each.**
- 2. A Letter of Recommendation from Local Church Pastor.**
- 3. Water Baptism Certificate & Birth Certificate Xerox Copy each.**
- 4. Medical Fitness Certificate.**
- 5. A Personal statement giving account of his/her experience of Salvation & Call to Christian Ministry.**

18. Declaration and Pledge:

I _____ declare that all the information furnished in this application are true and correct. I understand that FTS sets high standards of morality, spirituality, lifestyle, mission commitment and academic quality; and I promise to abide by and uphold them.

I shall submit to FTS rules, regulations and decision. If my quality of work is judged lower than the expected norm, and if advised to discontinue, I shall co-operate. I shall pay all dues of fees as expected by FTS without delay.

God enabling me, I shall do all within my power to study without break and complete the course in the prescribed time.

Signature: _____

Date: _____

Name: _____

Phone No.: _____

For Official Use

Application Accepted/ Not Accepted: _____

Eligibility for ATA _____ Session: _____

Principal / Admission Secretary

Date:



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LETTER OF RECOMMENDATION

(Strictly confidential)

Name of Application.....

Attention: This Letter of Recommendation is to be filled out by the Local Church Pastor and mailed directly to the Principal, Faith Theological Seminary.

1. How long have you known the applicant?
2. What do you know about the applicant’s spiritual experience?
3. In what ways the applicant had been involved in Christian Service?
4. To your knowledge does the applicant smoke? drink wine?Use illegal drugs?
Comment:
5. Give your opinion about the applicant’s intellectual ability.....
6. Further comments you have regarding the applicant that would help us in our evaluation.
.....

7. Please tick one.

I Recommend the Candidate.

I Recommend the Candidate with Reservation.

I do not Recommend the Candidate.

Date.....

Signature.....

Name

Designation.....

Address.....

Ph. No.:

Seal