

North Carolina College of Theology

Online Program



*Reaching the World for Jesus...
One Student at a Time!*

APPLICATION

This application may be printed, personally signed
and submitted via mail to:

NCCT
PO Box 865
Carolina Beach, NC 28428

When completing the application digitally, you may also sign it using a previously saved digital signature file or you may create one using various software including Adobe Acrobat. Many versions of Adobe Acrobat will instruct you on how to create your personal digital signature when clicking onto the signature line. Your application may then be uploaded via our secure website.

APPLICATION FOR ADMISSION

**PLEASE SUBMIT A RECENT PHOTO WITH APPLICATION*

DATE	
NAME <small>LAST</small> _____ <small>FIRST</small> _____ <small>MIDDLE or MAIDEN</small> _____	
PHONE <small>HOME</small> _____ <small>CELL</small> _____ <small>WORK</small> _____	
SOCIAL SECURITY #	BIRTH DATE <small>MM/DD/YEAR</small>
PLACE OF BIRTH <small>CITY</small> _____ <small>STATE</small> _____	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female
MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Other _____	NAME OF SPOUSE <i>(if applicable)</i>
MAILING ADDRESS <i>(include Apt #, if applicable)</i> <small>STREET / PO BOX</small> _____	
<small>CITY</small> _____	<small>STATE</small> _____ <small>ZIP</small> _____
EMAIL ADDRESS	

DEGREE LEVEL OF ENROLLMENT		
<input type="checkbox"/> Associate of Arts in Biblical Studies	<input type="checkbox"/> Bachelor of Arts in Biblical Studies	<input type="checkbox"/> Master's of Arts in Biblical Studies
Type your name exactly as you would like it on your DEGREE. →		

BACKGROUND INFORMATION *(This information taken to better serve you as a student.)*

Present Occupation		How long?	
Employer			
Name of Local Church			
Address		City	State Zip
Pastor's Name		Contact Phone	
Are you a minister? <input type="checkbox"/> Yes <input type="checkbox"/> No	Licensed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Ordained? <input type="checkbox"/> Yes <input type="checkbox"/> No	Other?
How long have you been in full-time service? _____ years _____ months			
To what denomination or organization do you belong or classify yourself?			
Reference: Relative/Friend		Relationship	
Address		City	State Zip

<input type="checkbox"/> Caucasian (non-Hispanic)	<input type="checkbox"/> Asian Pacific Islander	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Black (non-Hispanic)	<input type="checkbox"/> American Indian/Alaskan
<input type="checkbox"/> Other - Specify				

CITIZENSHIP

Country of Birth	Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If NO, please answer the following questions.</i>
Of what country are you a citizen?		
Are you a permanent U.S. resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	Alien Registration #	
Do you presently have a U.S. Visa? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what type?	Expiration Date

EDUCATION INFORMATION

Name of High School	Date of Graduation	
City	County	State
If you did not graduate, have you obtained a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No		When? (MM/DD/YEAR)

List ALL colleges attended in chronological order (latest last)...If additional space is needed, please use page 4)

Name of Institution	City	State
Dates attended: From _____ to _____	Hours Earned	<input type="checkbox"/> Semester <input type="checkbox"/> Quarter
Degree(s) Received		
Name of Institution	City	State
Dates attended: From _____ to _____	Hours Earned	<input type="checkbox"/> Semester <input type="checkbox"/> Quarter
Degree(s) Received		
Name of Institution	City	State
Dates attended: From _____ to _____	Hours Earned	<input type="checkbox"/> Semester <input type="checkbox"/> Quarter
Degree(s) Received		
Are you currently enrolled in the last institution attended? <input type="checkbox"/> Yes <input type="checkbox"/> No		If so, what will be your last date of attendance?
Are you eligible for re-admission to any of the institutions listed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, are reasons <input type="checkbox"/> Academic? <input type="checkbox"/> Disciplinary? <input type="checkbox"/> Other (please explain on page 4)		

ADDITIONAL INFORMATION

Have you ever been convicted for the violation of any federal, state, county, or municipality law? (excluding minor traffic violations)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, give full details on page 4.</i>
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\$60.00 Non-Refundable Application Fee must be submitted with application.

I have completed this application to the best of my ability and have been truthful to the best of my knowledge in answering all questions. I do hereby agree to abide by the high ethical standards set forth by the North Carolina College of Theology and to conduct myself in accordance to the expectation of NCCT in order for my life to bring glory and honor to the Lord, Jesus Christ.

I have read the Statement of Faith of the North Carolina College of Theology and agree to follow its doctrinal stand in accordance to the Word of God.

Signature _____

Date _____

COPYRIGHT ACKNOWLEDGMENT AND AGREEMENT

As a student, an affiliate with North Carolina College of Theology, I do hereby acknowledge submission to the **COPYRIGHTS of ALL NCCT CURRICULUM and RESOURCE MATERIALS**. At no time will I, the student, copy or plagiarize NCCT curriculum or resource materials.

By my signature below, I hereby agree and submit to these terms.

Signature _____

Date _____

Additional educational information and/or explanation:

Additional information regarding conviction for the violation of any federal, state, county, or municipality law (excluding minor traffic violations):

Additional miscellaneous information: