

Suttnerstraße 18, 22765 Hamburg <u>www.glocalcompassion.com</u> glocalcompassion@gmail.com

Tel-: 00494075686236

## GLOCAL THEOLOGICAL ACADEMY (GLOTA) APPLICATION FORM)

## **Application for Admission -**Program for which you are applying: ☐ Diploma in Theology ☐ Advanced Certificate in Theology ☐ Diploma of Theology ☐ Bachelor in Theology **Intended Semester of enrolment:** ☐ First Semester, September 20\_\_\_ ☐ Second Semester, March 20\_\_\_ Personal Information Legal Name Last First Middle Title: $\square$ Ms. $\square$ Mr. $\square$ Mrs. $\square$ Rev. $\square$ Dr. $\square$ Other (please specify) Preferred Name **Current Mailing Address** City State/Zip

Alternate Mailing Address		City	State/Zip
Primary Phone	Alternate Phone		
Primary Email		Alternate Email	
Primary Language		Secondary Language	·(s)
Academic Background	b		
Please list all institutions attende	ed, beginning	with the most recent	
College or University	Location	Dates of Attendance	Degree Received/Yea
College or University	Location	Dates of Attendance	Degree Received/Year
Graduate/Professional School	Location	Dates of Attendance	Degree Received/Year
Graduate/Professional School	Location	Dates of Attendance	Degree Received/Yea
Please list any courses previous of Seminary/School, name of c	=		al School. Include the name
Employment History			

Begin with your most recent employer					
From/To Dates	Job Title	Employer			
From/To Dates	Job Title	Employer			
From/To Dates	Job Title	Employer			
From/To Dates	Job Title	Employer			
Church Informatio	on				
Please list the church yo	u currently attend				
Name of Church		Address	Phone		
 Denomination		Pastor's Name			
Are you currently ordain	ed, licensed, or commi	ssioned for ministry? $\Box$	Yes □No		
If yes, name of Ordainin	g or Licensing Denomino	ation:			
Are you in good standing with this Denomination?   Yes   No (If no, please explain)					
Do you plan to seek min (If yes, please explain yo			ded		

How did you hear about Glocal Theological Academ	ny (GLOTA)?
□Website	
□Flyer	
□Facebook	
□Glocal Compassion gGmbH Faculty/Board Memb	er (please list):
□Your Pastor (please list):	
□Other (please specify):	
Personal Statements	
Please respond to one of the following questions, as typed, in essay format, and on a separate sheet of p	• • • • • • • • • • • • • • • • • • • •
For applicants who feel called into Ministry:	
In your opinion, what does it mean to be "called" to life, and personal decision to apply to Glocal Theolo	· · · · · · · · · · · · · · · · · · ·
For other applicants:	
Why you have decided to pursue theological educe will receive can be best applied to your respective f	
References	
Please provide the details of the who will serve as ye	our references
Name of Academic Reference	Phone

Title and Organization		
Mailing Address	City	State/Zip
Name of Church/Denominationo	ıl Reference	Phone
Title and Organization		
Mailing Address	City	State/Zip
Signature		
	application honestly, and to the bes cal Academy at the Glocal Compo	
Full Name (print)	Signature	Date