



Oblate School of Theology
 285 Oblate Drive
 San Antonio, TX 78216-6693
 www.ost.edu

APPLICATION FOR ADMISSION
GRADUATE SCHOOL

ANTICIPATED ENTRANCE: Fall Spring Summer Year 20__

Type or print legibly using ink
I. PERSONAL INFORMATION

Full Name _____
 Please PRINT Last (Family) (Title) First Middle Previous Name (if applicable)

San Antonio Address _____
 No. & Street City State Zip

Home Tel. No. ____ - ____ - ____ **Cell or Work No.** ____ - ____ - ____ **E-mail Address** _____

Mailing Address (until _____) _____
 No. & Street City State Zip

Billing Address _____ **Contact Person/Position** _____
 No. and Street City State Zip

Social Security Number _____ (optional)
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Date of Birth Month _____ Day _____ Year _____
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Military Information Veteran? <input type="checkbox"/> No <input type="checkbox"/> Yes Educational Benefits? <input type="checkbox"/> No <input type="checkbox"/> Yes What Chapter?

City/State/Country of Birth _____ **Country of Citizenship** _____

Male Female Single Married Divorced Widowed **Type of U.S. Visa** _____

Denominational Affiliation _____ <i>(Be as specific as possible e.g. American or Southern Baptist, rather than simply Baptist.)</i> Seminarians Only: Diocese _____ Religious Congregation _____
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The following **optional** information is requested only of **U.S. citizens and permanent residents**. The information on this page is strictly confidential.

- 1) Are you **Hispanic**? Yes No
- 2) If you are NOT Hispanic, mark one or more races to indicate what you consider yourself to be:
- White Black or African American Asian
 American Indian or Alaskan Native Native Hawaiian or other Pacific Islander

II. DEGREE PROGRAM (specify):

- Master of Divinity (80 hrs) Master of Divinity + Certificate for Presbyteral Ministry (104 hrs)
 Master of Arts (Theology) Master of Arts (Spirituality) Master of Arts in Pastoral Ministry
 Baccalaureate in Sacred Theology (S.T.B.) Master of Divinity for Clergy (*Previous Ordination Date*) _____

Other Programs:

- Certificate of Pastoral Studies Pre-Theology Program Pastoral English
 Lay Ministry Institute (undergraduate academic credit 1st yr.)

ENTRANCE TEST: GRE TOEFL Miller Analogies – **TEST SCORE (if known)** _____ **Scheduled/Test Date** _____



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Have you ever been denied admission to a school? No Yes Have you ever been expelled by a school? No Yes

Have you ever previously made an application (degree or non-degree) to this Graduate School? No Yes

III. EDUCATION:

List in chronological order all colleges and universities attended. Official transcripts of all college/graduate work must be sent to the REGISTRAR'S OFFICE by: June 30th for Fall Semester; Dec 30th for Spring Semester; and May 1st for Summer Session.

<u>Institution</u>	<u>Date of Attendance</u>	<u>Degree and Major</u>	<u>Date Graduated/Expected</u>
UNDERGRADUATE			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
GRADUATE			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Requesting to transfer in graduate theology? Yes No How many semester hours? _____ School? _____

IV. REFERENCES:

Name 3 persons acquainted with your academic and/or professional experience. Provide to each recommender a copy of the recommendation form and a stamped, addressed envelope. Address envelopes to: Registrar's Office, Oblate School of Theology, 285 Oblate Dr., San Antonio, TX 78216

Authority in your denomination
attesting to your good standing:

	Name and Title	No. and Street	City	State	Zip
<u>Academic</u>	_____	_____	_____	_____	_____
<u>Your choice:</u>	_____	_____	_____	_____	_____

V. EXPERIENCE:

List any significant professional or career related experiences:

Employer	Employers Address	Position Held	Approximate Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List significant academic honors or awards, and honor society memberships:

Describe any ministerial experience: _____

Do you have any medical condition or handicap that requires special attention, drugs or equipment, or facility accommodations that would affect your attendance? If yes, what are your specific needs? _____

I affirm that all the foregoing information is true and correct to the best of my knowledge.

Applicant's Signature

Date