The
Southern
Baptist
Theological
Seminary

Application for Admission

to Master of Arts in Theological Studies and Master of Music Programs

The Southern Baptist Theological Seminary
2825 Lexington Road • Louisville, Kentucky 40280
1 (800) 626-5525; In KY (502) 897-4617

5236 MATS (12/05)

APPLICATION CONTENTS

This is an official application for admission to The Southern Baptist Theological Seminary. Please complete this form in full and send it to us accompanied by the non-refundable application fee.

Please note that the Master of Arts in Theological Studies (MATS) degree is designed solely for the preparation of laypersons that will not serve vocationally in Christian service. Individuals who are called to full time ministry should contact the Admissions Office for counsel and information on other degree programs.

The Master of Arts in Theological Studies in Intercultural Leadership (MATSIL) is a restricted program for professional full time missionaries serving within a Great Commission ministry. Applicants should not seek admission for this degree without the prior consent of their mission agency and their regional missions leader. Applications will not be considered until the student's file is completed in full. Once a student file is complete, the Admissions Committee process will take 5-10 business days.

This application packet includes:
Application | Pastor/Leader Recommendation Form | Housing Application

APPLICATION DEADLINES

July 15 — Fall Semester | December 1 — January Term | December 1 — Spring Semester | May 15 — Summer Term

APPLICATION INSTRUCTIONS

The basic application for admission includes the following items:

1) The application form and applicable non-refundable fee: new applicants—$35, re-applicants—$25. Please make checks payable to Southern Seminary.

(2) An official recommendation from your pastor/leader. Please use the enclosed form and have your pastor/leader mail the completed form to the Admissions Office.

- MATSIL applicants will need to have this form completed by their Regional Leader

(3) An official transcript from each academic institution you have attended beyond high school mailed directly to the Admissions Office.

(4) A typed autobiography, of at least two pages in length, documenting your conversion experience, spiritual pilgrimage, life experiences (such as marriage, physical and emotional illness or divorce), and your purpose for seeking this degree.

- MATSIL applicants may submit their abbreviated autobiographical statement submitted to IMB/NAMB. It is the applicant's responsibility to ensure that this document is mailed to the Admissions Office at Southern Steminary

EXTENSION CENTERS

Southern Seminary maintains a number of extension centers in several cities around the nation. While students may enroll in any master's level degree program offered by the Seminary, only the core courses from the School of Theology M.Div. degree program are guaranteed to be offered. Please see the Southern Seminary website at **www.sbts.edu/academics/extension.php** for a full and current listing of Extension Center locations.

FINANCIAL AID

Students must be approved into a degree program by the Financial Aid deadline in order to qualify for Seminary based financial aid. The Financial Aid process takes place online. Access to the website will be included with the acceptance letter. Seminary based financial aid is only available to full time, main campus, Master's level students.

APPLICANT INFORMATION

Full name _____ _____
last | first | middle | name usually called

Maiden Name _____

Current mailing address _____
apartment/box/street number

_____ Telephone _____
city | state/country | zip | (home) | area code/number | (work)

Home city and state _____ Citizenship _____
country

Date of Birth _____ Place of birth _____
month | day | year | city/state/country

Emergency Contact: _____ _____ E-mail address _____
name | phone

Marital status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Re-married Sex: ☐ Male ☐ Female

Date of Divorce _____

Social Security number - -

Ethnic Group (For reporting purposes only):

☐ White: Non-Hispanic ☐ American Indian or Alaskan native ☐ Hispanic
☐ Black: Non-Hispanic ☐ Asian or Pacific islander ☐ Other _____

If you have provided an email address, that will be our primary method of communication with you regarding your application status. Please check your email regularly and provide us with any changes to your email account.

REGISTRATION INFORMATION

Please indicate the one semester/term in which you wish to begin:

☐ Fall Semester ☐ Spring Semester ☐ January Term ☐ Summer Term Year: _____

Please indicate student status:

☐ New ☐ Readmission (please attach an explanation)

Please indicate the campus within which you intend to begin study:

☐ Louisville Campus
☐ Internet Studies
☐ Extension Center:_____
(refer to http://www.sbts.edu/academics/extention.php for current locations)
☐ Other_____

Please check the one program to which you are seeking admission:

School of Theology	Billy Graham School of Missions, Evangelism & Church Growth	School of Church Music & Worship
☐ MATS	☐ MATS	☐ Master of Music
☐ MATS - Special	☐ MATS - Special	☐ Master of Music - Special
☐ MATS - Diploma	☐ MATS - Diploma	☐ Master of Music - Diploma
	☐ MATSIL	
	☐ MATSIL - Special	
	☐ MATSIL - Diploma	

CHURCH INFORMATION

In assessing your preparedness for seminary and the needs you may have upon entering our community, the Admissions Committee relies heavily upon your experience in local church settings.

Where are you currently a member?

name of church | mailing address | city | state | zip

phone | pastor | church clerk | date of membership

Is your local church (where you are now a member) affiliated with the Southern Baptist Convention? ☐ yes ☐ no

☐ If no, what denominational affiliation? Please be specific:_____

Students who are committed to serving within the Southern Baptist Convention, but are currently affiliated with another denomination, may be eligible to receive the Southern Baptist tuition rate. In order to be considered, a Covenant Agreement Form must be completed by the posted Admissions deadlines. This form is only available from the Admissions Office, must be signed by the student and current pastor, and must be received by the posted deadlines.

EDUCATIONAL INFORMATION

Education beyond high school. Please list all institutions attended including college, university, seminary, and professional training:

name of college/institution | state | major | dates attended | degree conferred? if so, what degree?

name of college/institution | state | major | dates attended | degree conferred? if so, what degree?

name of college/institution | state | major | dates attended | degree conferred? if so, what degree?

Note: An official transcript mailed from each institution is required.

EMPLOYMENT INFORMATION

Please list your current employment:

Employer	Position	City & State	Dates	Paid/Volunteer

FAMILY INFORMATION

Spouse's name _____ _____
last first middle preferred name

Spouse's occupation _____
title company name/address phone

Spouse's date of birth _____ Spouse's home state _____
month day year

Children: _____ _____
name date of birth M/F name date of birth M/F

_____ _____
name date of birth M/F name date of birth M/F

Is spouse a student? ☐ Yes ☐ No If so, ID#_____

PERSONAL INFORMATION

Current Information

Yes	No	
☐	☐	Do you have any physical, mental, or emotional disabilities which may require special assistance?
☐	☐	Do you have learning disabilities or mental/physical condition that might affect your academic work?
_____		If you are married, please rate, in your opinion, the health of your marriage (1 = low, 10 = high).

Background Information

☐	☐	Have you ever been dismissed, placed on academic, disciplinary probation or asked to withdraw by any educational institution?
☐	☐	Have you ever been convicted of any crime (other than minor traffic or driving violations) or been dishonorably discharged from any branch of the Armed Services?
☐	☐	Have you ever used illegal drugs or abused alcohol?
☐	☐	Have you ever been engaged in sexual misconduct of any nature?
☐	☐	Have you ever been under the care of a psychologist, mental health counselor, or psychiatrist?

If you answered "yes" to any one of the above questions, please include an explanation on a separate piece of paper. Honest responses will help us to best know how to minister to you and will not result in bias or an automatic reason for denial of your application.

STATEMENT (To be completed by all students)

In making application to become a student at The Southern Baptist Theological Seminary, I pledge myself to abide by all of the regulations of the faculty and administration as stipulared in the Student Handbook (www.sbts.edu/studentservices/pdf/handbook.pdf), to seek in everyway to protect the name of the institution, to preserve and protect the physical properties of the seminary. I understand the Seminary reserves the right to request a student to withdraw at any time.

❑ I consent to the IMB/NAMB releasing my spiritual autobiography to the Admissions Office of Southern Seminary. (Applicant is responsible for mailing this information to the Seminary.

Date_____ Signed _____

Pastor/Leader Recommendation

Master of Arts in Theological Studies/Master of Music

The Master of Arts in Theological Studies and the Master of Music are designed for the purpose of equipping lay persons for Christian ministry service in the local church or related Christian ministry. The MATSIL is for Professional Missionaries only.

To be completed by applicant

The Privacy Act of 1974 permits an applicant access to any information in his/her own student files.

_____ / / _____

Applicant's Name (Please print) Date of Birth

I ☐ waive ☐ do not waive my right of access to the contents of this recommendation form.

_____

Applicant's Signature

DEGREE PROGRAM

- ☐ Master of Arts in Theological Studies
- ☐ Master of Arts in Theological Studies in Intercultural Leadership
- ☐ Master of Music

To be completed by Pastor, Staff Minister, or Leader/Supervisor or Staff Minister/Leader (family members are not acceptable)

Minister's/Leader's name _____

Minister's/Leader's address _____

Minister's/Leader's position _____ Telephone number (_____) _____

How long have you known the applicant? _____

Having evidence that the applicant is:

- An individual of Christian commitment and spiritual maturity as evidenced by participation in the life of this church
- An individual of moral integrity and emotional stability
- An individual whom this church would recommend for seminary education

☐ Yes ☐ No I recommend him/her for admission to The Southern Baptist Theological Seminary

_____
name of church/organization

_____
address of church/organization

_____
denominational affiliation

_____
city state zip

_____
phone number of church/organization

_____
signature of minister/leader

_____
signature of church clerk

_____
name of minister/leader (please print)

_____
date of church approval/organization approval

_____
e-mail of minister/leader

_____
date applicant became member/appointment

Thank you for your thoughtful responses. Please return this form to:

Admissions Office, The Southern Baptist Theological Seminary, 2825 Lexington Road, Louisville, Kentucky 40280

Application for On Campus Housing

- Please mail completed application and housing deposit with application for admission.

Whether you need on-campus housing or not, this form must be returned with the other pages of the application in order for your application to be complete and processed for admission. If you do not need on-campus housing, please check the box below, print your name and return the form. Boyce students under 21 years of age *are required* to live on campus.

☐ **NO. I do not need on campus housing**.

Print Name _____ Date of Birth ___/___/___

Title Name _____ Social Security _____

Spouse Name, if applicable _____ Social Security _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Birthdate _____ Email _____

☐ New Student ☐ Current Student ☐ Returning Student ☐ Single ☐ Married

☐ Physical Handicap? Please explain:_____

Children:

Name Age Sex Name Age Sex

Name Age Sex Name Age Sex

When do you plan to begin your studies?_____ Date housing needed:_____
Month Year Month Year

A refundable $100 deposit is required with this application. Only check or money order, please. **Please make check separate from Admission application fee.** Refunds will be given if housing is unavailable, you are not accepted as a student, or you cancel your reservation more than 30 days before your planned occupancy. Include this housing application with your application for admission.

Boyce College Campus Housing Request

Single students

Dormitory Halls
(Check http://www.sbts.edu/campuslife/housing for move-in dates)

☐ Male ☐ Female
☐ Single occupancy ☐ Double occupancy

Name of preferred roommate_____

☐ Grinstead South Apartments
(only male students over 21; quadruple occupancy)

Married students without children

☐ Fuller Hall ☐ 1 bedroom furnished
☐ 1 bedroom unfurnished
☐ Grinstead South ☐ 1 bedroom unfurnished
☐ 2 bedroom unfurnished
☐ Springdale 2 bedroom unfurnished

Married students with children

☐ Grinstead South ☐ 1 bedroom unfurnished
☐ 2 bedroom unfurnished

Please list your apartment preferences and your first choice will be honored whenever possible:
1._____
2._____
3._____

The Southern Baptist Theological Seminary Campus Housing Request

Single students

Dormitory Halls
(Check http://www.sbts.edu/campuslife/housing for move-in dates)

☐ Male ☐ Female

☐ Fuller Hall ☐ 1 bedroom furnished
☐ 1 bedroom unfurnished
☐ Grinstead South ☐ 1 bedroom unfurnished
☐ 2 bedroom unfurnished

Married students without children

☐ Fuller Hall ☐ 1 bedroom furnished
☐ 1 bedroom unfurnished
☐ Grinstead South ☐ 1 bedroom unfurnished
☐ 2 bedroom unfurnished
☐ Springdale 2 bedroom unfurnished
☐ Foster Hall 1 bedroom unfurnished

Married students with children

☐ Grinstead South ☐ 1 bedroom unfurnished
☐ 2 bedroom unfurnished

Please list your apartment preferences and your first choice will be honored whenever possible:
1._____
2._____
3._____

Please list two people who will always know how to contact you:

Name: _____

Relationship: _____

Telephone: _____

Mailing Address: _____

_____

Email Address: _____

Name: _____

Relationship: _____

Telephone: _____

Mailing Address: _____

_____

Email Address: _____

For more information, please contact the Housing Services Office via the web at http://www.sbts.edu/campuslife/housing.php. You may also contact Housing through the seminary's toll free number at 1-800-626-5525 ext. 4203.

ADMISSIONS OFFICE
SOUTHERN BAPTIST THEOLOGICAL SEMINARY
2825 LEXINGTON ROAD
LOUISVILLE, KENTUCKY 40280

For Office Use Only:

Date admission was approved_____

Date of application for housing_____

Amount/Type of Payment_____