

# Application Form

# 2018

## PERSONAL INFORMATION — Please attach or email Passport Photo for Student Card

TITLE Place a cross in the appropriate box: Mr  Mrs  Miss  Ms  Dr  Rev.

SURNAME \_\_\_\_\_

GIVEN NAME/S \_\_\_\_\_

DATE OF BIRTH / /

HOME ADDRESS \_\_\_\_\_

PHONE NUMBER (1) \_\_\_\_\_ PHONE NUMBER (2) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

NEXT OF KIN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

NAMES & AGES OF ANY DEPENDENT CHILDREN \_\_\_\_\_

## REFERENCE INFORMATION

HOME CHURCH \_\_\_\_\_ ATTENDED SINCE \_\_\_\_\_

PASTOR \_\_\_\_\_ CONTACT DETAILS \_\_\_\_\_

## EDUCATIONAL INFORMATION

### SECONDARY EDUCATION [Credit Students please attach copies of Academic Transcripts]

COMPLETED YEAR 12 IN (year completed) \_\_\_\_\_

SCHOOL ATTENDED (name and State) \_\_\_\_\_

### TERTIARY EDUCATION [Credit Students please attach copies of Academic Transcripts]

UNDERGRADUATE QUALIFICATIONS \_\_\_\_\_

and UNIVERSITY/COLLEGE NAMES \_\_\_\_\_

WORK HISTORY FOR THE PRECEEDING 5 YEARS (Credit students only)

\_\_\_\_\_

\_\_\_\_\_

**NOTE: YOU MUST FILL IN Q1-5 & SIGN BELOW**

**COURSE DETAILS**

1. Please indicate which course / assessment level you are enrolling in by placing a cross in the appropriate box.

- |  |  |   |   |   |
|--|--|---|---|---|
| <input type="checkbox"/> Diploma of Theology           | <input type="checkbox"/> Diploma of Ministry                 | <input type="checkbox"/> Assoc. Deg of Theology | <input type="checkbox"/> Assoc. Deg of Ministry | <input type="checkbox"/> Bachelor of Theology |
| <input type="checkbox"/> BTh/DipTh<br>(combined award) | <input type="checkbox"/> BTh/BMin<br>(combined award)        | <input type="checkbox"/> BTh (Honours)          | <input type="checkbox"/> Grad Cert. of Divinity | <input type="checkbox"/> Grad Dip of Divinity |
| <input type="checkbox"/> Master of Divinity            | <input type="checkbox"/> MDiv/GradDipDiv<br>(combined award) | <input type="checkbox"/> Master of Theology     | <input type="checkbox"/> Master of Arts (Th)    | <input type="checkbox"/> PhD/ThD              |
| <input type="checkbox"/> PCA Cand. Course              | <input type="checkbox"/> Audit (no assessment)               |   |   |   |

2. **Mode of Study**     Full-time     Part-time     Evening Classes (selected units only)     Online Delivery (selected units only)

3. **Semester and Year of Commencement:**                      Semester 1                      Semester 2                      Year: 20\_\_\_\_\_

4. Fill out the details of the units you intend to undertake in your first semester at QTC. If you wish to take the unit for credit please write 'credit' in the credit/audit column. If you wish to audit the unit, i.e., attend lectures but take no assessment, please write 'audit' in the audit/credit column. If you wish to study for credit, you will need to fill out an ACT enrolment form once you have been accepted by QTC.

<b>COURSE</b> <i>eg. BTh, MDiv</i>	<b>UNIT CODE</b> <i>BTh / Diploma of Theology etc</i>	<b>UNIT NAME</b> <i>Please use actual not generic name of unit eg, Content and Setting of Gospel Traditions, not N.T. Intro A</i>	<b>CREDIT /AUDIT</b> <i>Credit = assessment + exams Audit = I do not want to do assessments</i>	<b>COST PER UNIT</b> <i>If FEE-HELP, tick FEE-HELP box below &amp; submit FEE-HELP form</i>
<b>TOTAL FEES</b>				

5. **What are your reasons for applying to undertake theological training?** (Attach extra pages if needed)

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**PAYMENT**

FEE-HELP     Cheque     Cash     Mastercard     Visa     Direct Debit

Credit Card No.               

Signature: \_\_\_\_\_                      Expiry Date:    /                      QTC ABN: 43513210677

**DECLARATION**

In making this application I understand that the Queensland Theological College makes no provision for accomodation or financial assistance I acknowledge that QTC has provided me with a schedule of fees and that all fees for 1st semester units must be paid by 28 February and by 31 July for 2nd semester units. I understand that in the case of Intensive units, fees are due by the end of the first full teaching day of the intensive. I understand that QTC has made available in their handbooks, the grievance procedures under which they operate and I agree to act within those procedures. I have read the Fees and Refund policies of the Queensland Theological College and agree to abide by these policies as a fee paying student of QTC. I understand that a refund of fees is possible within the terms provided under QTC's Refund Policy as stated in the Handbook and in the Fees Schedule. I understand that QTC may contact my pastor as listed above for a confidential reference.

**Signed:** \_\_\_\_\_                      **Date:** \_\_\_\_\_

<b>OFFICE USE ONLY</b>	<b>PROCESSING DATE:</b> /    /
TOTAL AMOUNT QTC FEES PAYABLE: _____	AMT PAID _____
DATE PAID _____	FEE-HELP    CREDIT/EFTPOS    CASH    CHEQUE    M/ORDER

*1st Semester Applications are due 1 December. 2nd Semester Applications are due 1 June.*  
*QTC regrets that it is unable to admit students to a course where their intended start date (first day of classes) is two weeks or less after the date that their application has been received.*