



CLARK THEOLOGICAL COLLEGE

Aolijen, Mokokchung –798601, Nagaland

Affiliated to the Senate of Serampore College (University)

Regd. with Nagaland Govt. Under Society Act No. RS 37 dated Feb. 18, 1974

APPLICATION FORM

THE DOCTOR OF THEOLOGY (D.Th.)

20..... – 20.....

APPLICATION FOR ADMISSION

NOTE: Before filling the Application, please go through the D.Th. Regulations of the Senate of Serampore College (University) and the procedures and regulations of the Clark Theological College.

Affix a
recent
passport
size photo

Branch: _____

SECTION A: PARTICULARS OF THE APPLICANT

1. Full Name (in block letters as per your academic records):

2. Gender (Tick one) Male Female **3. Date of Birth** (Day)____(Month)____(Year) _____

4. Place of Birth (Town/City)_____ (Dist.)_____

(Pin Code)_____ (State)_____ (Country) _____

5. Marital Status (Tick one) Married Not Married **6. Date of Marriage** _____

i. Do you plan to bring your family if family accommodation is available? Yes/No

ii. Is your spouse applying for any course of study at the College? Yes/No If yes, course _____

iii. Is there any health problem in your family? Yes/No

If yes, give details: _____

7. Father's Name_____ **10. Mother's Name** _____

8. Mother Tongue _____

9. Occupation/Profession _____

10. Church Affiliation _____

11. Ordained Yes No

12. Correspondence Address _____

(Town/City)_____ (Dist.)_____

(Pin Code)_____ (State)_____ (Country) _____

12. Phone _____ **13. Email** _____

SECTION B: ACADEMIC QUALIFICATIONS

14. Educational Qualifications (*Attested Photocopies are to be enclosed. The originals should be presented at the time of the interview.*)

<i>Examinations Passed</i>	<i>University</i>	<i>Year of Passing</i>	<i>Class/Division</i>	<i>Regd. No.</i>
HSLC				
HSSLC				
B.Th.				
BA/MA or Equivalent				
B.D.				
M.Th.				
Common Entrance Test (CET)				
Others				

15. Other Language/s Studied with duration _____

16. Details of Post M.Th. Experience and List of Publications. (*If more space is needed, please attach a separate sheet to this application form.*)

17. Titles of Theses (*Abstracts to be enclosed*)

a. B.D.: _____

b. M.Th.: _____

c. Any Other: _____

18. Details of Work Experience. *(If more space is needed, please attach a separate sheet to this application form.)*

19. If employed, give the Name and Address of the Employer. *(Including the Telephone and Email address, if any.)*

20. Nature and Designation of work at present in the above mentioned Institution.

21. Proposed Branch/Discipline of Doctoral Studies

a. Mention and specify the Focus/Sub-discipline:

Branch/discipline _____

Sub-branch/discipline _____

Inter-disciplinary _____

Any other _____

b. Proposed area of Research: *(Please give a brief description, to the extent to do so at this point, the area in which intending to do Specialized Research. If more space is needed please attach a sheet of paper.)*

22. State the Objective of Proposed Doctoral Studies

23. a. Knowledge of Classical and Modern Languages (Other than English)

Specify the number of Courses, their Nature (i.e. Preliminary or Advanced) and Level (B.D., M.Th., and/or any other) as well as Grades obtained in each Course. (Note: Describe proficiency in Non-examined Language skills.)

Hebrew

Aramaic

Syriac

Greek

Arabic

Latin

Sanskrit

Pali

German French

Indian Languages/other than Mother Tongue

Any other language/s

b. Knowledge of English (*tick one*)

Note: English being the medium of Doctoral Studies, candidates are expected to be proficient in English

	Excellent	Good	Fair
Comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spoken English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. Name and Addresses of two persons who can provide Confidential Information about you, one of whom shall be the Supervisor of your M.Th. Thesis or Head of the Department and a Church Leader. (Other than Relatives or Friends)

1. Name _____

Address _____

Contact No. _____ Email _____

2. Name _____

Address _____

Contact No. _____ Email _____

25. Sponsorship and Financial Support

a. i. Name _____

Address _____

Contact No. _____ Email _____

ii. Official Documents of Sponsorship (*Tick One*)

Enclosed To Follow

b. i. Financially Sponsored by a Theological College, Church or Institution? If so, specify.

ii. The Nature of the Sponsorship (Per Annum)

i. Full Rs. _____ ii. Partial Rs. _____

iii. If not a sponsored candidate, specify the means of Financial Support Study Period:

Note: Give necessary details. In the case of Financial support from Private Bodies, the College requires legally binding guarantee letter/s.

a. Self

b. Family

c. Others

26. Applicant's Declaration

I, _____ hereby declare that the particulars given above are true to the best of my knowledge and if admitted, I shall abide by the Rules and Regulations of the D.Th. Degree Programme of the Senate of Serampore College (University) and those of Clark Theological College.

Place: _____

Date: _____

Signature of the Applicant

FOR ANY ACADEMIC RELATED INFORMATION PLEASE CONTACT

The Principal, M: +91-8837002616; Email: ctcprin@gmail.com

The Dean of Post Graduate Studies, M: +91-9862882888; Email: dhanbir_rai@yahoo.com



MEDICAL FITNESS CERTIFICATE

For candidates seeking admission to Master of Theology at Clark Theological College

Name of the Applicant: _____

Gender: _____ Date of Birth: _____ Marital Status: _____

General Physical Examination

Height:	BP:
Weight:	P/R:

Systematic Examination

ENT:	Eyes:
Skin:	Skeletal:
CVS:	R.S.:
Abdomen:	CNS:

Past/Present H/O Illness

Hypertension:	Seizure Disorders:
Diabetes:	Major Operations:
Asthma:	Any other chronic illness:
History of allergy to drugs/food etc.:	Family History (HTN, DM, Mental Illness, Etc.):

Lab Examinations with Reports

Blood Group:	HIV:
HBsAg:	RBS:
Chest X-ray (if needed):	MO test (for Malaria endemic areas):

- Any recommendation by the examiner? _____
- Is the applicant fit for a rigorous course of study? _____

Name of the Doctor:

Registration No:

Full Address:

.....

Contact Number:

E-mail:

Signature

(Seal)



PASTORAL REFERENCE

(Strictly Confidential)

CTC trains committed men and women for a lifetime of Christian work and ministry. She takes all important steps before selecting and admitting the interested students. Therefore, please fill up the following form to help us make the right decision. If you need extra space for any item, please use a separate sheet of paper. Information provide by you will be treated strictly confidentially. Please send the filled form promptly and directly to **The Dean of Post Graduate Studies, Clark Theological College, Aolijen, Mokokchung – 798601, Nagaland, India.**

Thank you for your help.

SECTION 1: TO BE COMPLETED BY THE APPLICANT

Rev/Mr/Mrs/Ms (name of applicant)..... has applied for admission to the Master of Theology in the field of..... at Clark Theological College, Aolijen, Mokokchung, Nagaland.

SECTION 2: TO BE COMPLETED BY THE REFEREE

(The above mentioned applicant seeking application to CTC has nominated you as the referee)

- How long have you known the applicant?
- In what capacity have you known the applicant?

Please give your evaluation of the applicant by ticking to the right of each characteristic listed below:

Sl.No.	Characteristics	Fair	Good	Excellent	Outstanding
1	Commitment to Christ				
2	Christian Character				
3	Moral Integrity				
4	Dependency				
5	Leadership				
6	Creativity/Imagination				
7	Ability to accept criticism				
8	Friendliness/Compatibility with peers				
9	Emotional Stability				
10	Interpersonal relationship				

- How do you recommend this applicant to Clark Theological College? (Tick one)
 Do not recommend Recommend with reservation Strongly recommend

Your Name:

Title/Designation:

Address:

(Town/City) **(Dist.)**

(Pin Code) **(State)** **(Country)**

Date

Signature



ACADEMIC REFERENCE

(Strictly Confidential)

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- How long have you known the applicant?
- In what capacity have you known the applicant?

Please give your evaluation of the applicant by ticking to the right of each characteristic listed below:

Sl.No.	Characteristics	Fair	Good	Excellent	Outstanding
1	Academic aptitude				
2	Written communication in English				
3	Oral communication in English				
4	Diligence in study				
5	Leadership				
6	Creativity/Imagination				
7	Ability to accept criticism				
8	Friendliness/Compatibility with peers				
9	Emotional Stability				
10	Interpersonal relationship				

- How do you recommend this applicant to Clark Theological College? (Tick one)
 Do not recommend Recommend with reservation Strongly recommend

Your Name:

Title/Designation:

Address:

(Town/City) (Dist.)

(Pin Code) (State) (Country)

Date

Signature

DOCUMENTS ENCLOSED

1	Deposit Rs.500/- in favor of “Clark Theological College” towards Form fee	
2	Attested Photocopy of HSLC / HSSLC / School Certificate (Proof of Date of Birth)	
3	Three recent Passport size photographs	
4	Attested Photocopies of Degree Certificates (Both Secular and Theological)	
5	Attested Photocopies of Marks Statements (Both Secular and Theological)	
6	Attested Photocopies of Common Entrance Test (CET) Certificate / Mark Sheet	
7	Proof of appropriate experience in teaching or any other relevant experience	
8	Abstracts of B.D., M.Th., or other Theses	
9	Enclosed all recently published/unpublished articles	
10	A written description of the proposed Doctoral Research (not more than 1000 words)	
11	Proof, if any, of the completion of Seminar on Research Methodology	
12	Financial guarantee letter (Bishop/President/Sponsor/Parents/others)	
13	Letter from your local pastor (Stating your Communicant membership)	
14	Sponsorship letter from the Head of your Church (Pastor/Bishop/President)	
15	Character and conduct certificate from the Institution where you have studied last	
16	Medical Fitness Certificate	
17	A brief statement about your decision to do research study.	
18	Pastoral Reference	
19	Academic Reference	

Note:

1. Applications will not be processed unless the above mentioned documents are attached.
2. All original certificates/degrees/diplomas should be made available for scrutiny at the time of Personal Interview.

Send the filled-in application with all attachments to - **The Principal, Clark Theological College, Aolijen, Mokokchung - 798601, Nagaland, INDIA**

Date: _____

Signature of the Applicant