

Theologische Hochschule Elstal Johann-Gerhard-Oncken-Straße 7 14641 Wustermark Germany

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## **QUESTIONNAIRE**

## APPLICATION FOR THE STUDY AT THEOLOGICAL SEMINARY ELSTAL

| Full name:       |  |  |  |  |
|------------------|--|--|--|--|
|                  |  |  |  |  |
|                  | Attach photo Please  — Do not staple!                  |  |  |  |
|                  | Please, tick one programme only                        |  |  |  |
| Application for: | plication for: Bachelor in Evangelical Theology (B.A.) |  |  |  |
|                  | Master in Evangelical Theology (M.A.)                  |  |  |  |
|                  | Master in Diaconia and Social Theology (M.A.)          |  |  |  |

| Full name:  |                                |  |  |  |  |  |
|---|--------------------------------|--|--|--|--|--|
| A. PERSONAL DETAILS (enter exactly as contained in your passport) |                                |  |  |  |  |  |
|   | Please write in block capitals |  |  |  |  |  |
| Surname/ Family name:   |                                |  |  |  |  |  |
| First/ Given name(s):   |                                |  |  |  |  |  |
| Male: Female:   | Academic title:                |  |  |  |  |  |
| Date of birth (day/month/y  | rear): Place of birth:         |  |  |  |  |  |
| Nationality/ Nationalities:                                       |                                |  |  |  |  |  |
|   |                                |  |  |  |  |  |
| CORRESPONDENCE A  | DDRESS                         |  |  |  |  |  |
| Street:   |                                |  |  |  |  |  |
| Post/ Zip Code, town:   |                                |  |  |  |  |  |
| County, province, state:  |                                |  |  |  |  |  |
| Country:  |                                |  |  |  |  |  |
| Telephone, area code  |                                |  |  |  |  |  |
| Fax   |                                |  |  |  |  |  |
| E-mail:   |                                |  |  |  |  |  |
| E-man:  |                                |  |  |  |  |  |
| PARENTS   |                                |  |  |  |  |  |
|   |                                |  |  |  |  |  |
| MADITAL STATUS: single  |                                |  |  |  |  |  |
| MARITAL STATUS: single  married                                   |                                |  |  |  |  |  |
| since:  | with (Full name):              |  |  |  |  |  |
| since.  | with (1 un name).              |  |  |  |  |  |
| CHILD/REN (full names, age)                                       |                                |  |  |  |  |  |
| (1311 Haines, age)  |                                |  |  |  |  |  |
| <br>  |                                |  |  |  |  |  |
|   |                                |  |  |  |  |  |

| ne: |   |   |                             |           |                   |         |  |  |
|-----|---|---|-----------------------------|-----------|-------------------|---------|--|--|
|     | B. DETAILS OF EDUCATION (if necessary, please use an extra sheet) |   |                             |           |                   |         |  |  |
|     | Secondary Sch   | nool, High School   |                             |           |                   |         |  |  |
|     | From -  | to  | Details                     |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     | Highest school  | l leaving certificate   |                             |           | T                 |         |  |  |
|     | Date  | Original Na   | nal Name of the Certificate |           | Country           |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     | Academic studi  | certificates as autho   | rized copies                |           |                   |         |  |  |
|     |   | liog in Cormony or i  | n othon Countri             | 00        |                   |         |  |  |
|     |   |   | Dograp                      |           |                   |         |  |  |
|     | from - to   | Institution   | program                     | Certifica | ate/Qualification | Country |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     | Please add all c  | certificates as autho   | rized copies                |           |                   |         |  |  |
|     | Have you com  | Have you completed a time of preparation/foundation course for theological studies? |                             |           |                   |         |  |  |
|     | from - to   | Institution   | Degi                        | ree       | Place             | Country |  |  |
|     |   |   |                             |           |                   |         |  |  |
|     |   |   |                             |           |                   |         |  |  |

## **Professions**

| from - to | Profession | Institution | Place | Country |
|-----------|------------|-------------|-------|---------|
|           |            |             |       |         |
|           |            |             |       |         |

Please add certificates and credentials as authorised copies

| Full name:  |                                     |                           |                         |                 |         |  |  |  |
|---|-------------------------------------|---------------------------|-------------------------|-----------------|---------|--|--|--|
|   | A man odkom kio                     | han adarastian damasa     |                         |                 |         |  |  |  |
|   | Any other higher education degrees? |                           |                         |                 |         |  |  |  |
|   | from - to                           | Institution               | Degree                  | Place           | Country |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   | Please add cer                      | tificates as authorised c | opies                   |                 |         |  |  |  |
| с сш  | JRCH MEMI                           | рерспір                   |                         |                 |         |  |  |  |
|   |                                     | DEKSIIIF                  |                         |                 |         |  |  |  |
| Your bapt<br>Date, place  |                                     |                           |                         |                 |         |  |  |  |
| 71  | ,                                   |                           |                         |                 |         |  |  |  |
| In which  | Churches have yo                    | u been a member?          |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
| Please inc  | lude the name (ar                   | nd address) of a Revere   | nd or a church leader   | that we may cor | ntact!  |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
| Experienc   | ces in Churches: `                  | Which are/were vour ro    | esponsibilities in chur | ch work?        |         |  |  |  |
| Experiences in Churches: Which are/were your responsibilities in church work?   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
|   |                                     |                           |                         |                 |         |  |  |  |
| I take into   | account,                            |                           |                         |                 |         |  |  |  |
| 1. that the Bund Evangelisch-Freikirchlicher Gemeinden in Deutschland gives no guarantee for financial support for  |                                     |                           |                         |                 |         |  |  |  |
| myself, my wife and family for my studies at Elstal Theological Seminary.   |                                     |                           |                         |                 |         |  |  |  |
| 2. the BEFG is not obliged for presenting a place of work after my studies and upon completion of examination.  |                                     |                           |                         |                 |         |  |  |  |
| 3. I agree that the documents of my application will be presented to all members of the admittance commission of the  |                                     |                           |                         |                 |         |  |  |  |
| Theological Seminary under attention of the data protection of BEFG.  4. I agree that Elstal Theological Seminary may contact the persons named for a recommending reference. |                                     |                           |                         |                 |         |  |  |  |
| agree that Elsan Theorogen Seminary may contact the persons named for a recommending reference.   |                                     |                           |                         |                 |         |  |  |  |
|   | Place                               | , date                    | e                       |                 |         |  |  |  |
|   | Signature of the Applicant          |                           |                         |                 |         |  |  |  |