

Mount Angel Seminary Non-Resident Application Biographical Data



Date: _____

Name _____
Last First Middle

Home Address _____
City State Zip

Home Phone (____) _____ Work Phone (____) _____

Cell Phone (____) _____ Email Address _____

In case of emergency please contact: _____

Relationship _____

Address City State Zip

Home Phone (____) _____ Work Phone (____) _____

Cell Phone (____) _____

For reporting purposes only:

Age _____ Date of Birth _____ Place of Birth _____

Social Security Number _____

Marital Status _____ Ethnic Identification _____

Religious denomination _____

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Educational Background

College/University Attended
Grade/Degree

City/State

Dates Attended

Major

Approximate average GPA in college _____

Which studies did you like best? _____

least? _____

Did you fail any courses? (Specify) _____

Honors and awards: _____

Foreign languages (specify: indicate speaking/ writing facility) _____

Years of foreign language study: _____

Indicate which philosophy or theology courses you have had in college and graduate school:

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Work Experience

List chronologically from the present any paid work that you have done. Give dates, type of work, duration, and which, if any, you especially liked or disliked.

Volunteer Work

Educational Intent

Are you seeking a degree? Yes _____ No _____ If so, which degree? (check one)

____ Master of Arts in Theology

____ Master of Arts (with concentration in Sacred Scripture)

If not, please explain:

Are you preparing for a specific ministry in the church? _____

Why have you selected Mount Angel Seminary? _____

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List the ways in which you have been involved and are involved in your church (e.g., server, choir member, lector, special minister of the Eucharist, etc.):

Additional Data

To what neighborhood, civic, social or service organizations do you belong?

Do you belong to any professional organizations? _____

How do you plan to finance your education? _____

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References

The candidate will supply letters of recommendation from the following persons:

Pastor/Priest acquaintance/Religious Supervisor/Rabbi	
Name _____	
Address _____	
City _____	State _____ Zip _____
Telephone (_____) _____	(_____) _____
Home	Work
Employer	
Name _____	
Address _____	
City _____	State _____ Zip _____
Telephone (_____) _____	(_____) _____
Home	Work
Cell phone (_____) _____	email _____

The following persons may be contacted by the seminary:

Other Acquaintance	
Name _____	
Address _____	
City _____	State _____ Zip _____
Telephone (_____) _____	(_____) _____
Home	Work
Cell phone (_____) _____	email _____
Other Acquaintance	
Name _____	
Address _____	
City _____	State _____ Zip _____
Telephone (_____) _____	(_____) _____
Home	Work
Cell phone (_____) _____	email _____

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Application Requirements

Candidates seeking admission to Mount Angel Seminary must have:

1. A completed application form with recent photo;
2. A completed *Permission to Procure a Criminal Background Check* form;
3. Two letters of recommendation concerning the applicant's character and suitability for the program (one must be from the applicant's pastor or some other person designated by the Admissions Board—see page 5 of the application);
4. Listed references – see page 5 of the application form;
5. A letter from the applicant requesting admittance to the school, specifying the degree program the applicant wishes to enter;
6. Official transcripts of the applicant's previous academic credits certifying that a B.A. or its equivalent has been earned;
7. Completed measles immunization form (if born after January 1, 1957);
8. Interview with the Director of Admissions;
9. Non-refundable \$25.00 application fee (check made payable to Mount Angel Seminary).