



APPLICATION FOR ADMISSION

Please return completed form to: SCTC Admission Dept., P.O. Box 346, Buderim, QLD 4556
or email to registrar@sctc.org.au

Personal Information:

Surname: _____ Title: *(Mr./Mrs. Etc)* _____

First and Middle Names: _____

Current Address: _____
(Street address) (Suburb) (State) (Postcode)

Mailing Address: *(if different from above)*

(Street address) (Suburb) (State) (Postcode)

Email Address: _____

Phone Numbers: _____
(Home) (Work) (Mobile)

Citizenship: Australian Citizen Aboriginal/Torres Strait Islander
 Permanent Resident* New Zealand Citizen*
*documentation required

Date of Birth: _____ Place of Birth: _____

Marital Status: Single Married Divorced Widowed

Name of Spouse: _____ Date of Marriage: _____

Dependent Children (names and year of birth): _____

Name and Address of Next of Kin: _____

Disabilities or Special Needs: _____

Is English your first language? Y/N IELTS Score _____ Date of Test _____

Course chosen: _____ Diploma of Theology (pathway 1) 1 ½ years taught at diploma level
 _____ Diploma of Theology (pathway 2) 1 year taught at degree level*
 _____ Diploma of Ministry (pathway 1) 1 ½ years taught at diploma level
 _____ Diploma of Ministry (pathway 2) 1 year taught at degree level*
 _____ Advanced Diploma of Theology
 _____ Advanced Diploma of Ministry
 _____ Selected Units Only (not pursuing an award)
 _____ Unsure of Course

* Applicant must satisfy degree entry requirements. Course is equivalent to the first year of the Bachelor of Theology.

Education:

Secondary schools attended: _____
 Year completed: 12 other (please specify) _____ ATAR _____ (minimum of 77.10 required for entry to BTh)

Post-secondary (list all post-secondary institutions attended- use additional sheet if necessary):
 Name of institution: _____ Award: _____ Year of award _____
 Name of institution: _____ Award: _____ Year of award _____
 Name of institution: _____ Award: _____ Year of award _____
 (Attach certified copies of all transcripts for all post-secondary institutions attended)

Employment history:

Please list all employment undertaken, dates of employment and reasons for leaving.

Employment status while in college:

Do you anticipate working while undertaking theological studies? Y/N _____

- No student will be permitted to enrol for more than two subjects (8cps) per semester while working full-time.
- No student will be permitted to enrol full-time who is working more than 15 hours per week.

Financial:

How will you finance your education?
 Fee-Help Austudy
 Other (please specify) _____

Purpose of study:

Discuss your reasons for undertaking theological studies. Please be sure to explain the types of Christian service you intend to pursue after graduation: (use additional sheets if necessary)

Church Affiliation:

What Church do you attend regularly? _____

Are you a member of a Church? Y/N _____

Is your pastor or church leadership supportive of your decision to attend theological college? Y/N _____

References:

All applicants must have two letters of reference sent directly to the college by their designated referees. Each letter must indicate the referee’s evaluation of your character and suitability for Christian service. One letter should be from your pastor or approved church leader. No letters will be accepted from family members. Your personal interview with the Principal will be scheduled after the receipt of your complete application including letters from referees.

Minister/pastor referee

Personal referee

Name: _____

Name: _____

Street Address: _____

Street Address: _____

Town/suburb: _____

Town/suburb: _____

State: _____ Postal Code: _____

State: _____ Postal Code: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

For official use only:

___ Complete Application ___ Pastoral Reference ___ Other Reference ___ Photograph

___ School Transcripts ___ Residency Documentation ___ Interview Scheduled

___ Interview Conducted ___ Admission Decision ___ Letter of Admission Decision Sent