

APPLICATION FOR

Master of Arts in Theology

For information on Credential, Colloquy Pastoral, DPM or DCE certification, or International Student Admissions, please contact the Admissions Office for the appropriate application.



UNIVERSITY MISSION STATEMENT

Concordia University Irvine, guided by the Great Commission of Christ Jesus and the Lutheran Confessions, empowers students through the liberal arts and professional studies for lives of learning, service and leadership.

1530 Concordia West, Irvine, CA 92612-3203
Phone: (949) 214-3389 • (800) 229-1200, ext. 3389
Fax: (949) 214-3389
E-mail: gradadmission@cui.edu

WWW.CUI.EDU

Please send application form and requested items to:

**Attn: Christ College
MA Theology
Concordia University
1530 Concordia West
Irvine, CA 92612-3203**

To **complete your admission file** we will need:

1. Completed Application
2. \$50 non-refundable application fee
3. Official copies of college/university transcripts
4. Two completed Recommendation Forms
5. Completed Statement of Intent

Please **PRINT** or type

Applicant's name _____
Last *First* *Middle* *Maiden*

Social Security No. _____ - _____ - _____ Semester you plan to enroll at Concordia: **Summer** _____ **Fall** _____ **Spring** _____

PRESENT MAILING ADDRESS

Street _____ City _____ State _____ Zip _____

PERMANENT HOME ADDRESS *If different from above, specify dates mail should go to this address: ____/____/____ to ____/____/____*

Street _____ City _____ State _____ Zip _____

Home phone: (____) ____ - _____ Facebook Email: _____

Cell phone: (____) ____ - _____ Twitter Username: _____

E-mail address: _____

Please list the best email address for electronic communication between you and the university.

PERSONAL BACKGROUND

Date of birth ____/____/____
Month *Day* *Year*

Sex: Male Female Citizenship: USA Permanent resident Other country _____

(Please request an International Student Application.)

Have you been found guilty, been adjudicated guilty, or otherwise been convicted of a crime in any court? (Excluding minor traffic violations)

Yes No

If you answered yes to either question above, please attach a full description including date(s) and disposition of case.

PROGRAM APPLYING FOR **Pastoral Certification (Cross-cultural Ministry Center)**

Master of Arts in Theology, with an emphasis in:

- Research
- Theology and Culture
- Christian Education Leadership
- Christian Education Leadership with DCE Certification
- Youth Ministry (Cohorts begin Fall 2015)
- Apologetics (Cohorts begin Fall 2016)

Will you be applying for financial aid? Yes No

RELIGIOUS AFFILIATION

- Lutheran Church – Missouri Synod
- Baptist
- Evangelical Lutheran Church of America
- Catholic
- Non-Denominational Christian
- Methodist
- Presbyterian
- None
- Other _____

Congregation name _____ Pastor's name _____

Congregation address _____

City _____ State _____ Zip _____ Phone () _____

RACE/ETHNICITY

Do you consider yourself to be Hispanic/Latino? Yes No

In addition, please select one or more of the following racial categories to describe yourself:

- American Indian or Alaskan Native
- Vietnamese
- Mexican
- Asian Indian
- Japanese
- Cuban
- Black or African American
- Korean
- Puerto Rican
- Native Hawaiian or Pacific Islander
- Chinese
- South or Central American
- Filipino
- Other Asian
- Other Hispanic or Latino
- White or Caucasian

PREVIOUS EDUCATION

1. College/University Name _____ City _____ State _____

Dates attended _____ Units completed at the time of application _____

Degree and Date Received _____ Cumulative GPA (based on a 4.0 scale) _____

2. College/University Name _____ City _____ State _____

Dates attended _____ Units completed at the time of application _____

Degree and Date Received _____ Cumulative GPA (based on a 4.0 scale) _____

3. College/University Name _____ City _____ State _____

Dates attended _____ Units completed at the time of application _____

Degree and Date Received _____ Cumulative GPA (based on a 4.0 scale) _____

4. College/University Name _____ City _____ State _____

Dates attended _____ Units completed at the time of application _____

Degree and Date Received _____ Cumulative GPA (based on a 4.0 scale) _____

5. College/University Name _____ City _____ State _____

Dates attended _____ Units completed at the time of application _____

Degree and Date Received _____ Cumulative GPA (based on a 4.0 scale) _____

(List additional schools attended on a separate sheet.)

NONDISCRIMINATION POLICY

Concordia University does not discriminate on the basis of race, color, national and ethnic origin, sex, or disability in any of its policies, procedures or practices. This includes but is not limited to admissions, employment, financial aid, educational services, programs and activities. Inquiries regarding this policy may be directed to the Vice President of Administration at Concordia University, 1530 Concordia West, Irvine, CA 92612-3203.

CERTIFICATION

I certify that to the best of my knowledge the information furnished in this application is true and complete. I agree that if such information, or any information upon which my admission is based, is not true or complete, Concordia University may rescind my degree. I further agree that if admitted, I will abide by the rules and regulations of Concordia University including, but not limited to, those rules contained in the current Concordia University catalog. I acknowledge that all official transcripts which I forward to Concordia University become the property of Concordia University and will not be forwarded to any institution nor returned to me.

I also understand that I am not eligible for financial aid unless I am accepted into a post-baccalaureate or graduate program. I am not eligible to receive financial aid for any courses taken prior to admission to the graduate program.

Applicant's signature

Date

