

APPLICATION FOR READMISSION - GRADUATE

Semester _____ Year _____

If you have been out of school for at least one semester, but have not been out for more than a year, please supply the information requested below. Enclose a check or money order for \$10.00 (payable to New Orleans Baptist Theological Seminary) to cover the application fee (non-refundable).

NOBTS-ID# _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

Check the program of study which you will pursue.*

- | | |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> <i>Master of Divinity (Standard)</i> | <input type="checkbox"/> <i>Master of Arts in Theology</i> |
| <input type="checkbox"/> <i>Master of Divinity: Specialization in _____</i> | <input type="checkbox"/> <i>Master of Arts in Biblical Studies</i> |
| <input type="checkbox"/> <i>Master of Arts in Christian Education</i> | <input type="checkbox"/> <i>Master of Arts in Missiology</i> |
| <input type="checkbox"/> <i>Master of Arts in Marriage and Family Counseling</i> | <input type="checkbox"/> <i>Master of Arts in Worship Studies</i> |
| <input type="checkbox"/> <i>Non-Degree Student</i> | <input type="checkbox"/> <i>Master of Music in Church Music</i> |

New Orleans Campus Off-Campus Center _____

Current Denomination Affiliation:

- Southern Baptist Other Baptist Non-Baptist

Current Place of Church Membership _____

Address _____

Marital Status: Married Single Engaged Divorced Widowed

Have you ever been divorced or legally separated? _____ If so, more than once? _____

If married, do you have children? _____ Please give the number of children and their ages.

Means of Financial Support? _____

Date FIRST enrolled at NOBTS? _____

Date LAST enrolled at NOBTS? _____

You will be notified of the action of the Admissions Council concerning your readmission to the seminary for further study. Every attendance for the session indicated is checked for the purposes of readmission.

**NOTE: You cannot change your degree program on this Application for Readmission. If you wish to change your degree program, please submit a completed Student Request Form to the Registrar's Office.*

Return this form to: Registrar's Office, NOBTS, 3939 Gentilly Blvd., New Orleans, LA 70126

***** OFFICE USE ONLY *****

Clinic Cleared _____ English Fulfilled _____ Business Office _____

Transcript _____ Fee Paid _____