



PHILIPPINE BAPTIST
THEOLOGICAL SEMINARY

APPLICATION FOR ADMISSION

For Filipino Applicants

Registrar's Office
19 Tacay Road, Guisad
Baguio City, Philippines
(074)442-0361
registrar@pbts.net.ph
<https://pbts.net.ph>

PHILIPPINE BAPTIST THEOLOGICAL SEMINARY

The Admissions Committee welcomes your application to PBTS. Included in this packet are the forms needed for your application as well as instructions in accomplishing them. Please fill-out the forms carefully and legibly. The application process should be completed, preferably at least one month before the term the student intends to begin.

The Application Checklist for Filipino Citizens

1. Complete the Application

- 2x2 Color Photo with White Background
- Application Form (pages 3 to 5)
- Application Fee (one-time, non-refundable): Php 660.00¹
- Church Recommendation Form² (pages 6 to 8)
- Medical Certificate Form (page 9)
- Three sets of Recommendation Form (page 10-15)³
- Official Transcript of Records⁴
- Marriage Certificate (for married applicants)⁵
- Essay on conversion, service, and call to the ministry
- English Exam Result: _____ Date Taken: _____

Notes:

1. Payment can be made through bank deposit. Please deposit the amount to Bank of Philippine Islands (BPI) Account number 0561-0297-68. Then email the scanned deposit slip to registrar@pbts.net.ph or fax it to +63-74-445-5462.
2. This recommendation must be by vote of the congregation and not just from the pastor or church secretary. The applicant should have been an active member of the recommending church for at least one year before entering the Seminary. Some circumstances, clearly explained, may allow exceptions to this one-year rule on faculty approval.
3. Each of this will be accomplished and mailed directly to PBTS by three individuals who are not relatives of the applicant.
4. This should indicate the date of graduation and Special Order number.
5. This should be the official Certificate issued by Philippine Statistics Authority in SECPA.

2. Submit the Application

- Direct all materials to

The Registrar

Philippine Baptist Theological Seminary
19 Tacay Road, Guisad, Baguio City, 2600
registrar@pbts.net.ph

3. Wait for your Notice of Approval from the Admissions Committee

4. Make arrangements for seminary housing

- Seminary Housing Application Form (page 16)

The Admission Procedure

ELIGIBILITY

An applicant for admission to PBTS is expected to display the following characteristics:

1. commitment to Christian service on the basis of a divine call;
2. good standing in the home church, community, and church as evidenced by a letter of recommendation from his/her local church;
3. good physical health, as evidenced by a thorough medical examination that includes a chest x-ray.

For those applying for admission to a Master's degree program, an applicant must have completed a college degree. Those who have completed at least 74 college units, including 12 in English, or have completed at least a two-year vocational course, including 12 units in English; or have finished K-12 are qualified for admission to any Bachelor's degree program.



PHILIPPINE BAPTIST
THEOLOGICAL SEMINARY

Application Form

Applicant Information

Full name _____
last or family first middle maiden (if applicable)

Current mailing address _____
apartment/box/street number Municipality/City

Province/State _____ Zip _____ Citizenship _____
Country

Email Address _____ Telephone _____

Applicant's Date of Birth _____ Applicant's Place of Birth _____
month day year Town/City/Country

Applicant's Marital Status: Single Married Gender: Male Female
 Annulled Widowed
 Re-married Separated

Educational Information

High School _____
Name of School Address Year Graduated

Education beyond high school. Please list all institutions attended including bible school, college, university, seminary, and professional (technical-vocational) training. You may use a separate sheet of paper if needed.

name of institution - do not abbreviate Address dates attended degree conferred with Special Order No.

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name of institution - do not abbreviate Address dates attended degree conferred with Special Order No.

Church Information

What is your current church membership?

name of church - do not abbreviate		Mailing Address
phone	name of Pastor	date of membership

Is the church that holds your membership affiliated with the Southern Baptist Convention?

Yes No

If no, what denominational affiliation? Please be specific: _____

Purpose in Seeking Seminary Education

What is your desired ministry (indicate order of preference: 1,2,etc... 1 being the most preferred)

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> Pastorate | <input type="checkbox"/> Music Ministry | <input type="checkbox"/> Counseling |
| <input type="checkbox"/> Church Planting | <input type="checkbox"/> Church Administration | <input type="checkbox"/> Evangelism |
| <input type="checkbox"/> Christian Education | <input type="checkbox"/> Chaplaincy | <input type="checkbox"/> Missions |
| <input type="checkbox"/> Other (please specify) _____ | | |

Registration Information

Please indicate the semester in which you plan to begin your study

First Second Summer Institute Year: _____

Please indicate student status:

New Readmission (please attach an explanation) Other: _____

Location:

Baguio Campus Extension Center: _____

See www.pbts.net.ph/extension for current locations

Check the *one* program to which you are applying admission:

- | | |
|---|--|
| <input type="checkbox"/> Master of Divinity | <input type="checkbox"/> Master of Church Music |
| <input type="checkbox"/> Master of Arts in Ministry | <input type="checkbox"/> Master of Arts in Missiology |
| <input type="checkbox"/> Bachelor of Theology | <input type="checkbox"/> Bachelor of Church Music |
| <input type="checkbox"/> Associate in Church Music | <input type="checkbox"/> Associate in Ministerial Training |

Family and Ministry

1. Please attach to your application an essay that describes in detail the following areas regarding your family and ministry (you may use as many sheets of paper as you need for this essay):

- | | |
|----------------------------------|---|
| a. home and religious background | c. experience in the ministry |
| b. call to the ministry | d. reasons for desiring theological education |

Financial Arrangements

1. How do you plan to support your seminary education?

Personal Information

Spouse's name: _____
last first middle

Date of marriage _____
month day year

Children: _____
name date of birth m/f name date of birth m/f

_____ name date of birth m/f name date of birth m/f

_____ name date of birth m/f name date of birth m/f

Have you ever had serious illness or injury which interrupted your schooling? Please explain.

Have you ever been refused admission by or dismissed from a theological or other schools?

Waiver

PBTS reserves the right to request information from your present or former pastor or convention leader or other persons. In order to assure complete objectivity, it is helpful if you waive your right to access to letters of reference. Please indicate your decision. Those from whom references are requested will be notified of your decision.

- I hereby waive my right of access to letters of reference that PBTS receives.
- I do not waive my right of access to letters of reference that PBTS receives.

Signed _____ Date _____
Applicant's Signature

Statement

If admitted to study at the Philippine Baptist Theological Seminary, I pledge to live in harmony with the purposes and objectives of the school as stipulated in the Student Handbook and Catalog. I understand the Seminary reserves the right to request a student to withdraw at any time.

Signed _____ Date _____
Applicant's Signature



PHILIPPINE BAPTIST
THEOLOGICAL SEMINARY

Church Recommendation

TO THE APPLICANT

Please complete this section before giving it to your church pastor.

Application for the year _____

First Semester Second Semester Summer Institute

Name _____

Address _____					
House no.	Street	Baranggay	City	Province	Zip Code

Telephone _____		
landline	cellphone	work

Email _____

TO THE PASTOR

The student named above is applying for admissions to Philippine Baptist Theological Seminary. We are committed to training God-called and church-affirmed men and women for Christian ministry. Your recommendation is valuable in evaluating the qualifications of this candidate. After completing the form, mail it directly to: THE REGISTRAR, P.O. BOX 7, BAGUIO CITY 2600, PHILIPPINES.

Please complete the following sections.

A. About the Applicant

1. How long have you known the applicant? _____ Years _____ Months

2. How well do you know the applicant? Casually Well Very Well

3. How long has the applicant been a member of your church? _____ Years _____ Months

3a. How did the applicant gain membership?

By baptism Date baptized _____

By transfer Date transferred _____

By profession of faith

4. Describe the applicant's involvement in the local church. Please be detailed [for example, leadership positions and year(s) held]. Please use a separate sheet if the space below is not enough.

B. Ability of the applicant

1. Which of these spiritual gifts/talents has the candidate demonstrated within the church?

<input type="checkbox"/> Preaching	<input type="checkbox"/> Administration	<input type="checkbox"/> Music
<input type="checkbox"/> Teaching	<input type="checkbox"/> Counseling	<input type="checkbox"/> Others _____

2. In regards to potential in Christian ministry, how do you rate the applicant?

<input type="checkbox"/> Excellent	<input type="checkbox"/> Very Good	<input type="checkbox"/> Good	<input type="checkbox"/> Poor
------------------------------------	------------------------------------	-------------------------------	-------------------------------

3. Is the applicant the type whom you would be willing to call as pastor or worker of your church once seminary training is completed?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
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4. Using the scale of 1 to 5, with 5 as the highest, please rate the applicant in the following areas:

<p>a. Achievement _____ <i>Does the applicant display the ability to formulate, execute, and carry out plans to completion?</i></p> <p>b. Emotional adjustment _____ <i>Does the applicant maintain a balanced and self-controlled life?</i></p> <p>c. Intelligence _____ <i>Does the applicant possess high mental capacity?</i></p> <p>d. Leadership _____ <i>Does the applicant display the ability to influence and inspire others?</i></p> <p>e. Perseverance _____ <i>How does the applicant handle difficulties in a given task?</i></p> <p>f. Physical condition _____ <i>Is the applicant healthy and able to cope with seminary studies?</i></p>	<p>g. Sensitivity _____ <i>How well does the applicant display sensitivity to how others feel?</i></p> <p>h. Self-image _____ <i>How well does the applicant see him/her self?</i></p> <p>i. Sociability/Friendliness _____ <i>Does the applicant show capability of identifying with different groups of people?</i></p> <p>j. Teachability _____ <i>How well does the applicant respond to teaching moments?</i></p> <p>k. Teamwork _____ <i>Does the applicant show an ability to work with others well?</i></p>
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C. Aiding the Applicant

1. How will the applicant meet his/her financial needs?

<input type="checkbox"/> Help from the family	<input type="checkbox"/> Help from the church
<input type="checkbox"/> Help from friends	<input type="checkbox"/> Personal savings
<input type="checkbox"/> Others _____	

2. If the church decides to help the applicant, please indicate the amount and the frequency
Amount _____

<input type="checkbox"/> annual	<input type="checkbox"/> quarterly	<input type="checkbox"/> semi-annual	<input type="checkbox"/> monthly
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3. The financial help will be sent: through the school directly to the student

CHURCH ACTION

Approved for recommendation by the church during its regular/special business meeting held on

_____.
month day year

Approved by (Please check if you are not the pastor):

Elder Chairman of the Board Chairman of the Deacons Other _____

Your name (please print/write in block letters) _____ Title _____

Your address (please print) _____

Your signature _____ Date signed _____

Church secretary (Full name and signature) _____

Date signed _____

Recommendation for Admission

to The Philippine Baptist Theological Seminary

Applicant's Name: _____

This form is confidential. It will become the property of PBTS and will not be returned to the student. Should the applicant be denied application or otherwise not enroll, PBTS is neither obliged to disclose the contents of the application to the applicant nor release any information to a party legally unrelated to the school unless required to do so. Upon enrollment, the application form becomes a part of the student's permanent academic record.

To be completed by Recommender (family members are not acceptable)

Please print legibly.

Recommender's name _____ E-mail address _____

Recommender's address _____

Recommender's job title _____ Telephone number (_____) _____

How long have you known the applicant? _____

How did you know the applicant? _____

Please indicate your understanding of the applicant's ministerial goals

Please evaluate the applicant in the following areas. Make comments on the back of this sheet for any Below Average or Poor responses. Feel free to use that space for other comments.

Legend: 1-Poor | 2-Below Average | 3-Average | 4-Above Average | 5-Outstanding | N-No Information

Character (person of moral and spiritual integrity)	1	2	3	4	5	N
Judgment	1	2	3	4	5	N
Emotional stability	1	2	3	4	5	N
Maturity	1	2	3	4	5	N
Commitment to church-related vocation	1	2	3	4	5	N
Potential for effective ministry	1	2	3	4	5	N
Skill in relating to others	1	2	3	4	5	N
Financial responsibility	1	2	3	4	5	N
Spouse/family relations	1	2	3	4	5	N
Academic/intellectual abilities	1	2	3	4	5	N
Leadership potential	1	2	3	4	5	N

Do you know of any physical, mental or emotional problems which might hinder effective work in Christian ministry? yes no If yes, please elaborate.

Do you know of any physical, mental or emotional problems which might hinder the applicant's academic progress? yes no If yes, please elaborate.

Do you know of any personal habits (sexual behavior, drug/alcohol use) or personal prejudices which might hamper service in a church-related position? yes no If yes, please elaborate.

How do you perceive the attitude of the applicant's spouse/fiancé toward seminary education and vocational Christian ministry?

- Very positive
- Neutral
- Not applicable
- Positive, with some reservations
- Negative
- Please elaborate _____

Would you recommend this person to a church-related position upon completion of seminary training? yes no

Do you recommend this person for admission?
 yes no

If yes, please check one:

- With confidence
- With some reservations
- With reluctance

What characteristics do you consider to be the greatest strengths or talents of the applicant?

What characteristics do you consider to be the greatest weaknesses of the applicant?

Additional Comments:

Recommender's Signature

Date

Thank you for your thoughtful responses. Please return this form to:

The Registrar
Philippine Baptist Theological Seminary
19 Tacay Road, Guisad
Baguio City, 2600
Philippines

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