

BACHELOR OF THEOLOGY PROGRAM APPLICATION INSTRUCTIONS ATLANTIC SCHOOL OF THEOLOGY

DEADLINES The deadlines for submission of BTh application forms and all supporting documents are as follows:

Application Deadline	Starting Date	Starting Term
June 30	September 1	Fall term
November 30	January 1	Winter term
March 31	June 1	Summer term

Applications and/or reference letters received after these deadlines will be processed for the following academic term.

APPLICATION FEE - An \$80 non-refundable application fee must be paid prior to the assessment of your application. This fee must be paid in Canadian funds by cheque, e-transfer, money order, bank draft, Visa credit card or MasterCard credit card. Visa debit and MasterCard debit payments are accepted at the Business Office in person only.

Incomplete application packages will not be processed. Please ensure that the following items are sent to the Registrar at Atlantic School of Theology by the application deadline.

STEP 1 - COMPLETED APPLICATION FORM - Complete this application form using the fillable PDF option.

Instructions to complete BTh application form as fillable PDFs:

You will need the latest version of Adobe Reader - http://get.adobe.com/reader/. Before completing the applicable form you will need to save the form (PDF format) to a location on your computer by right clicking and selecting "Save As". Once you have saved the form as a PDF to your computer, you are ready to complete the form. Complete the various sections of the form by tabbing through the form. After you have completed the form, save a final version to your computer.

STEP 2 - AUTOBIOGRAPHICAL ESSAY - Write a 1-2 page essay describing your learning style and educational goals.

Ensure you include the following information in the upper left-hand corner on the first page of your essay:

Name Autobiographical Essay Date

STEP 3 - OFFICIAL TRANSCRIPTS - Request an **official transcript for all** of your previous and current educational institutions to be sent directly to the Registrar at Atlantic School of Theology, including high school.

STEP 4 - LETTERS OF REFERENCE - Three letters of reference are required as part of the Bachelor of Theology application process. Letters of reference will be treated confidentially. You will ask each of your referees to complete the BTh Letter of Reference form.

Contact three referees to complete a BTh Letter of Reference on your behalf. Your referees must be your teachers, instructors, community leaders, ministers/pastors/priests, or employers. They may not be relatives or close personal friends.

Referees should send their letter of reference directly to the Registrar by email or regular mail.

STEP 5 - SUBMIT YOUR APPLICATION - Submit your application by email or print and send by regular mail.

Be sure to include your completed application form and autobiographical essay in ONE email or package.

registrar@astheology.ns.ca

The Registrar
Atlantic School of Theology
660 Francklyn Street
Halifax NS
Canada B3H 3B5

To drop off in person please note the Registrar's Office is located on the lower level of the AST Library.

INTERVIEW - The Admissions Committee has the option of requesting an admissions interview with you. The interview may be conducted in person on campus at AST or by video conference. AST will coordinate a suitable interview date, time and location with you, if required.

REVIEW AND DECISION - Your application package will be reviewed by the Admissions Committee and the Academic Dean. You will receive a letter from the Academic Dean confirming your admission (or non-admission) to AST.

QUESTIONS - If you have questions about these instructions, the Bachelor of Theology program application form or the application and/or admission process, please contact the Registrar at registrar@astheology.ns.ca or 902.425.3691.

RESIDENCE - For information about or to apply for residence at AST, please visit the Students page on the AST website: http://www.astheology.ns.ca/future/residence.html

FINANCIAL AID - At this time, AST is not offering designated financial assistance to BTh students. Funding arrangements are under review. You are encouraged to seek funds from employment, savings, student loans, or sponsors (e.g. church organizations or parents, if applicable).



BACHELOR OF THEOLOGY PROGRAM APPLICATION FORM ATLANTIC SCHOOL OF THEOLOGY

Name:				
Las	t	First		Middle
Address:	eet			
City/Town	P	rovince/State	Postal Code	Country
Email:			Phone	::
Date of birth:_	yyyy/mm/dd			
	cial Insurance Numbe			Check here if you do not have a Canadian Social Insurance Number:
Gender:	Male Femal	e Gender Diver	se	
First Languag	ge: English	French Oth	er	
	the following informat			ove student services. Information you provide heredy. You may skip this section if you wish.
Do you consid O Yes O No Please note: I	der yourself a person OPrefer not to an	swer ations for persons with (old be requested and documented by writing to the
Please indica	ite if you a member of Prefer not to an	nis question if you wish or regular participant in swer		ition or community.

Racial or Ethnic Identity (you may skip this question if you wish) Please indicate if you self-identify within any of the following groups:	
Indigenous, Aboriginal, First Nations status, First Nations non-status, Métis, or Inuit from Canada or the USA Yes No Prefer not to answer	
Indigenous, Aboriginal, or First Nations from other parts of the world	
Yes No Prefer not to answer	
Asian or a person of Asian descent Yes No Prefer not to answer	
1 Total Not to anowor	
Black or a person of African descent Yes No Prefer not to answer	
Pacific Islander or a person of Pacific Islander descent	
Yes No Prefer not to answer	
South Asian or a person of South Asian descent	
Yes No Prefer not to answer	
West Asian, Arab, or a person of West Asian or Arab descent	
Yes No Prefer not to answer White or a person of European, Anglo, or Celtic descent	
Yes No Prefer not to answer	
More than one racial or ethnic identity	
Yes No Prefer not to answer	
Other (please specify):	
Citizenship: Canadian Other:	
Status in Canada: Permanent resident International student Visa Other:	_
If you previously attended AST, indicate program(s) and year(s) attended:	_
When do you intend to begin the BTh program at AST? Summer Term (June 1)	
Fall Term (September 1)	
Winter Term (January 1)	
Previous Academic Studies:	
Date of High School Diploma or Equivalent (required). If incomplete, state "INC."	
Date of High School Diploma or Equivalent (required). If incomplete, state "INC." Name and date of college diploma(s), if applicable. If partial or incomplete, state "INC." Name and date of university degree(s), if applicable. If partial or incomplete, state "INC."	_
Name and date of college diploma(s), if applicable. If partial or incomplete, state "INC."	
Name and date of college diploma(s), if applicable. If partial or incomplete, state "INC." Name and date of university degree(s), if applicable. If partial or incomplete, state "INC."	
Name and date of college diploma(s), if applicable. If partial or incomplete, state "INC." Name and date of university degree(s), if applicable. If partial or incomplete, state "INC." Failure to disclose previous attendance at any educational institution will invalidate this application.	

Official Transcripts: Request an official transcript for all of your previous and current education to be sent directly to the AST Registrar. The transcript must be issued directly by the institution to AST. Photocopies are not permitted.

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Contact three referees to complete a Letter of Reference on your behalf.

They must use the BTh Letter of Reference form provided by AST.

Date

Your referees must be your teachers, instructors, community leaders, ministers/pastors/priests, or employers. They may not be relatives or close personal friends.

Please complete in full:

	Reference #1	Reference #2	Reference #3
Name			
Job Title			
Organization			
Email Address			
tlantic School of Theolo		ant agrees to comply with AST's	d of Governors and the Senate of Code of Conduct and to abide by
confirm that the informa	tion given in this application for	m is true, complete and accurate	

Signature

An \$80 non-refundable application fee must be paid prior to the assess	sment of your application.
Please confirm your payment method:	
Cheque made payable to Atlantic School of Theology.	
E-Transfer sent to businessoffice@astheology.ns.ca	
Credit card processed directly with the Business Office (902.222.0661)	
	yyyy/mm/dd

yyyy/mm/dd

Submit your completed BTh application form and autobiographical essay in ONE package by email registrar@astheology.ns.ca

OR in paper format by regular mail to:

For Registrar's Office Only

The Registrar Atlantic School of Theology 660 Francklyn Street Halifax, Nova Scotia Canada B3H 3B5

Received
Complete application package (application form and autobiographical essay)
Three Letters of Reference

Official Transcripts _____

Application fee paid _____