



MASTER OF ARTS (THEOLOGY & RELIGIOUS STUDIES) APPLICATION INSTRUCTIONS ATLANTIC SCHOOL OF THEOLOGY

The deadline for submission of MA application forms and all supporting documents is **March 1**. Applications received in full by the application deadline will be automatically considered for entrance scholarships. (There is no separate entrance scholarship application.)

APPLICATION FEE - An \$ 0 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.

1. **COMPLETED APPLICATION FORM** - Complete the application form using the fillable PDF option. Submit your application by email or print and send by regular mail.

Instructions to complete MA application form and/or application fee 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.

2. **LETTER OF INTENT** - Write 1 to 2 pages describing your area(s) of interest, including your goals. Ensure you include the following information in the upper left-hand corner on the first page of your letter of intent:

"Name"

MA Letter of Intent

"Date"

3. **ACADEMIC WRITING SAMPLE** - Include a sample of your academic writing (at least 10 pages) with your application package. Ensure you include the following information in the upper left-hand corner on the first page of your academic writing sample:

"Name"

MA Academic Writing Sample

"Date"

4. **OFFICIAL TRANSCRIPTS** - Request an **official transcript** for all of your previous and current postsecondary education to be sent directly to the Registrar at Atlantic School of Theology.

Note for AST MDiv graduates: If you are an AST MDiv graduate you do not need to submit official transcripts for this application. All of your official transcripts on file at AST will form part of your MA program application.

5. **LETTERS OF REFERENCE** - Three academic letters of reference are required as part of the MA application process. Letters of reference will be treated confidentially. You, the applicant, will ask each of your referees to complete the MA Letter of Reference form provided at the end of the MA application form document. An individual PDF of the MA letter of reference form is also available on the Application & Course Registration Forms of the AST website:

<http://www.astheology.ns.ca/future/application-registration-forms.html>.

Your referees will complete the prescribed MA letter of reference form by hand or electronically (the form provided is a fillable PDF). **Referees should send their letter of reference directly to the Registrar by email or regular mail.**

Be sure to include your completed application form, letter of intent, and academic writing sample in ONE email or package. Submit your application package by email to registrar@astheology.ns.ca OR in paper format by regular mail, courier, or drop off in person to:

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

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

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.

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.

For information about or to apply for residence at AST, please visit the AST Residence website:
<http://www.astheology.ns.ca/future/residence.html>

If you have questions about these instructions, the MA Program application form or the application and/or admission process, please contact the Registrar at registrar@astheology.ns.ca or 902.425.3691.

**MASTER OF ARTS (THEOLOGY & RELIGIOUS STUDIES)
APPLICATION FORM
ATLANTIC SCHOOL OF THEOLOGY**



Name: _____
Last First Middle

Address: _____
Street

City/Town Province/State Postal Code Country

Email: _____ Phone: _____

Date of birth: _____
yyyy/mm/dd

Social Insurance Number: _____
(required for official tax receipt for tuition and/or bursaries)

Gender: Male Female Gender Diverse

First Language: English French Other _____

Religious denomination or tradition _____

Optional information

AST collects the following information for statistical purposes and to improve student services. Information you provide here will not impact the university's decision to admit you to a program of study. You may skip this section if you wish.

Students with Disabilities

Do you consider yourself a person with a disability?

Yes No Prefer not to answer

Please note: Learning accommodations for persons with disabilities should be requested and documented by writing to the Registrar prior to the start date of your studies.

Racial or Ethnic Identity

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

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:

Normally MA students begin the program in September. When do you intend to begin the MA Program at AST:

Summer Term
Fall Term
Winter Term

Are you applying for admission to the MA program as:

- a first degree in theology, course only
- a first degree in theology, with thesis
- specialization in theology, course only
- specialization in theology, with thesis

If you are applying for the MA program with thesis, you must possess or develop a reading proficiency in a modern language other than English, normally French or German, prior to registering for thesis credits. Please see Language Requirements in the MA Program description in the Academic Calendar for more details.

Have you completed an undergraduate modern language course with a "B" grade or higher? Yes No

List any awards, publications or achievements not already indicated in your application but which you would judge to be relevant to your admission to the MA program (attached a separate sheet if necessary):

Previous Academic Studies:

Indicate all postsecondary institutions attended. Failure to indicate previous attendance at any postsecondary institution will invalidate this application. For additional space, please attach a separate sheet of paper.

All postsecondary (universities, colleges and other institutions of higher learning) attended	Years attended	Area of study	Degree(s) granted

If any of your transcript(s) will be issued in a name other than the name you list on page one of this application form, please provide your previous name:

Official Transcripts: Request an official transcript for all of your previous and current postsecondary education to be sent directly to the Registrar.

Note for AST MDiv graduates: If you are an AST MDiv graduate you do not need to submit official transcripts for this application. All of your official transcripts on file at AST will form part of your MA program application.

Letters of Reference

Read Application Instructions, Item 5 about arranging for letters of reference.

Please complete in full:

	Reference #1	Reference #2	Reference #3
Name			
Job Title			
Organization			
Full Mailing Address			
Phone Number			
Email Address			

Regulations relating to all academic matters and student conduct are made by the Board of Governors and the Senate of Atlantic School of Theology. Upon admission, the applicant agrees to comply with AST's Code of Conduct and to abide by all regulations from time to time promulgated by Atlantic School of Theology.

I confirm that the information given in this application form is true, complete and accurate.

Date: yyyy/mm/dd

Signature

An \$80 non-refundable application fee must be paid prior to the assessment of your application. Please confirm your payment method:

- Cheque made payable to Atlantic School of Theology.
- E-Transfer sent to businessoffice@asttheology.ns.ca
- Credit card processed directly with the Business Office (902.222.0661) _____

yyyy/mm/dd

Submit your application package (application form, letter of intent, and academic writing sample) by email to registrar@astheology.ns.ca OR in paper format by regular mail, by courier, or drop off in person to:

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

If you have questions about the application process, email registrar@astheology.ns.ca.

For Registrar's Office Only

Received:

Complete application package (application form, letter of intent, academic writing sample) _____

Three Letters of Reference _____

Official Transcripts _____

Application fee paid: _____

Notes/follow up: _____

**MASTER OF ARTS (THEOLOGY & RELIGIOUS STUDIES)
LETTER OF REFERENCE
ATLANTIC SCHOOL OF THEOLOGY**

Applicant's Name: _____
Last First

Referee's name: _____

Position or Title: _____

Organization: _____

Email address: _____

Phone number: _____

The Admissions Committee and the Academic Dean of Atlantic School of Theology would appreciate a confidential statement from you concerning the applicant named above, indicating how well you think this applicant would perform as a graduate student in this area. If you can compare this applicant with others known to you who have attended or are now applying for admission to this program, we would welcome such a comparison. Please indicate if, to your knowledge, there are any factors that might prevent this applicant from successfully completing graduate study. AST appreciates the assistance you provide by submitting your letter of reference for the applicant.

All information you provide in this letter of reference will be treated confidentially.

Instructions:

Please complete the following letter of reference form by hand or electronically (the form provided is a fillable PDF).

Instructions to Complete the Letter of Reference as a fillable PDF:

You will need the latest version of Adobe Reader - <http://get.adobe.com/reader/>. Before filling in any information you will need to save the letter of reference form (PDF format) to a location on your computer by right clicking and selecting "Save As". Once you have saved the letter of reference form to your computer as a PDF, you are ready to complete the letter. Complete the various sections by tabbing through the letter. After you have completed the letter, save a final version to your computer. **Submit your letter of reference directly to the Registrar** by email to registrar@astheology.ns.ca OR print and send by regular mail.

If sending by mail, please send it to the following.

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

	Upper 2%	Upper 10%	Upper 25%	Upper 50%	Lower 50%	No Basis for Judgment
Overall Ability						
Scholarship						
Intelligence						
Ability to express self orally (English)						
Ability to express self in writing (English)						
Perseverance						
Emotional Maturity						
Resourcefulness						
Potential for a career in this area						

How long have or did you know this applicant? _____

In what capacity do you or did you know this applicant? _____

If you were responsible for the admission decision regarding this applicant, which of the following would best represent your action? (Check one, please.)

I would definitely accept the applicant with absolutely no reservations.

I would accept the applicant.

I would probably accept the applicant, but have some reservations.

I am uncertain what my action would be.

I would probably reject the applicant.

I would definitely reject the applicant.

Is there any other information you wish to share with AST that will assist in making an admission decision?

Date: _____

Signature: _____