



12. Special Honors Conferred: \_\_\_\_\_.

13. Who will provide your letter of reference (attach the letters)

a. Ecclesiastical Reference: \_\_\_\_\_.

b. Academic Reference: \_\_\_\_\_.

14. Give details of the local church you attend with pastor's contact:

\_\_\_\_\_  
\_\_\_\_\_

15. What are your special talents, hobbies or interests? \_\_\_\_\_

16. What is your denominational affiliation? \_\_\_\_\_

17. Are you personally acquainted with members of the COTRTS faculty or staff? \_\_\_\_\_

If so, please identify that person \_\_\_\_\_

18. Please indicate all employment/ ministry experiences you have

No	Description of work / Ministry	Employer	Period of work/ Ministry

19. How did you hear about COTRTS? \_\_\_\_\_

20. At present, what are your vocation objectives? List 1,2 and3 in order of your preference)

Pastoral Ministry  Teaching  Missionary Service  Youth Ministry   
Others

21. Please attach a statement explaining your desire to pursue theological education and reasons for your interest in COTRTS in particular. (One Page) Use additional paper.

22. Please provide a statement of your experience as a Christian, including your conversion, significant spiritual events in your life, and areas in which you were seen or are experiencing growth. (One Page) Use additional paper.

23. When did you accept Jesus Christ as your personal Savior and Lord? \_\_\_\_\_

24. When did you take water baptism? \_\_\_\_\_ (attach Baptismal Certificates)

25. Do you exercise any spiritual gifts/s? \_\_\_\_\_

What gifts do you have? \_\_\_\_\_

26. Do you have the call of God for Christian Ministry? \_\_\_\_\_

What assurance do you have of the call? \_\_\_\_\_

27. Are you willing to be a Servant –leader? \_\_\_\_\_

28. If you are admitted to COTRTS, you will be required to produce certification that you are able to financially support your studies.

29. If you are not able to support yourself, who will be supporting you?

Father/Guardian     Local Church     Organization/Sponsoring Body/Agency

**(Please complete the enclosed financial Guarantee form)**

**DECLARATION AND PLEDGE**

I, \_\_\_\_\_ hereby do declare that all the details which are mentioned above are true to best of my knowledge. I assure that, if I am admitted, I will abide by the rules and regulations of COTR theological Seminary. \to the right of the Seminary administration to take any appropriate disciplinary action against me, if, in their judgment, my behavior or character is contrary to the emphasis of the seminary.

Signature of the applicant

Date:

(Any falsification of the document may cause dismissal)

**FOR OFFICE USE ONLY**

a. When the application was received? \_\_\_\_\_

b. Has application fee been paid? \_\_\_\_\_

c. Have all the required documents been submitted? \_\_\_\_\_

d. Grade of the Entrance Examination \_\_\_\_\_

e. Admission: Approved/ Rejected/Deferred \_\_\_\_\_

f. Remarks \_\_\_\_\_

Date:

Signature of the Registrar

**FINANCIAL STATUS AND GUARANTEE FORM**

Dear Applicant,

Please fill in section A and forward section B to the person/ Organization taking responsibility for paying your fees at COTRTS. If you are self –sponsored, you may fill in section B yourself, but it must co-sign by a responsible person (Father/Guardian). The completed form should be mailed to the Office of the Registrar along with the application for admission. COTRTS Prefers the Sponsor to be an Organization or a Local church.

**Section A – Finance Status Form**

Name : \_\_\_\_\_.

Name of father .guardian \_\_\_\_\_.

Occupation \_\_\_\_\_ . Annual Income \_\_\_\_\_.

Employer’s name and address \_\_\_\_\_.

\_\_\_\_\_.

\_\_\_\_\_.

If Married, Name of Spouse \_\_\_\_\_.

Occupation \_\_\_\_\_ . Annual Income \_\_\_\_\_.

Employer’s name and address \_\_\_\_\_.

\_\_\_\_\_.

Total Family Income \_\_\_\_\_ . And Property owned \_\_\_\_\_.

\_\_\_\_\_.

Details on the dependent (s), if any

Name \_\_\_\_\_ . Age \_\_\_\_\_.

Name \_\_\_\_\_ . Age \_\_\_\_\_.

Name \_\_\_\_\_ . Age \_\_\_\_\_.

**SECTION B –Financial Guarantee form**

This section is to duly filled and signed by the sponsor of the student and returned to the Seminary. The student is required to pay his/her in four installments as directed by the seminary Administration .If a student fails to clear his/her arrears at least one week period to the date of final examinations , the admit card will not be issued to him/her. If fees are sent directly to COTRTS, Demand Draft must be drawn in favors of *COTR College of ministries*

(Answer either 1a or 1b)

1a. Name (s) of sponsor(s)

_____	_____
_____	_____
_____	_____
_____	_____

1b. Name of sponsoring body (If sponsored by an organization)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of the executive director/ President of the Organization: \_\_\_\_\_

2. Duration of sponsorship (Please tick one of the following)

One Year       Two years       Three years

***Kindly treat the statement of sponsorship with utmost seriousness, as seminary holds the sponsor/s responsible for fulfilling the financial commitment.***

**STATEMENT OF SPONSORSHIP**

I hereby solemnly undertake the committed financial Sponsorship of \_\_\_\_\_, on his /her admission to COTRTS Theological Seminary, in accordance with the terms above.

Signature

Official Seal (If an Organization)

Date

**THIS PORTION TO BE COMPLETED BY APPLICANT**

Name (in block letters)\_\_\_\_\_.

Present Mailing Address\_\_\_\_\_.

H. No/ name

Post Office

City/ District

State

Pin Code

Country

Phone\_\_\_\_\_ . Program of study\_\_\_\_\_.

Date\_\_\_\_\_ . Signature\_\_\_\_\_.

**A.LETTER OF REFERENCE (Pastor)**

**CONFIDENTIAL**

The Admission Committee of COTRTS takes very seriously the evaluation that you give below. Our primary concern is to admit those who are deemed by their spiritual mentors to be called by God to His Service.

1. How long have you known the applicant?\_\_\_\_\_

How well? Very well Rather well Casually Not well

2. Spiritual Maturity: Please check the appropriate box.

Not observed      weak      Fair      Good      Out

A. Relationship to Christ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Relationship to spouse/family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Relationship to Church body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Relationship to Community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Gifts and potentials for ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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3. What have you (or the church)reorganization as the applicant’s primary qualification both for study and for ministry?

4. How Would the applicant respond to an academic training environmental such as the one at COTRTS?
5. What might be the main hindrance to the applicant's time of study at COTRTS?
6. Please list any and all reservation you have concerning the applicant
7. Would you happily receive the applicant upon his completion of the course, for your pastorate or church staff or prefer him/her as a colleague? If not, Why?

**Summary**

- Highly recommend
- Recommend
- Recommend with reservation
- Do not recommend
- Contact me for further information

Signature: _____
Name: _____
Position: _____
Church: _____
Address: _____
_____
_____
_____
Phone: _____
Email: _____

**MENTORING AGREEMENT FORM**

**THIS PORTION TO BE COMPLETED BY APPLICANT**

Name (in block letters)\_\_\_\_\_.

Present Mailing Address\_\_\_\_\_.

H. No/ name

Post Office

City/ District

State

Pin Code

Country

Phone\_\_\_\_\_ . Program of study\_\_\_\_\_.

Date \_\_\_\_\_ . Signature\_\_\_\_\_.

Name of the mentor:

Educational/ Theological qualification and the name of accrediting/affiliating body:

Present position in the church/ ministry/ organization:

Years in the ministry:

Address for communication:

Declaration: I do here by declare that I am willing to be a mentor for student/s of COTRTSDOES and promise to give my best to build the theological, academic, spiritual and ministry life of my mentee/s. I will discuss but will not force any doctrinal issues on the student.

Signature and date:



## **DOCUMENTS REQUIRED**

1. Two passport size Photographs
2. Certificates of all yours Diplomas and Degrees(photocopies)
3. Transcripts of all your Diplomas and Degrees (photocopies)
4. Financial Commitment Letter as in the Form Appended
5. One Page Testimony
6. Nonrefundable Application and prospectus fee of Rs.200/-
7. A Statement of why Seeking Admission At COTR
8. Mentor agreement form
9. Reference Form(Academic)
10. Reference Form(Ecclesiastical)
11. Ministry Experience Certification

**Send duly filled in application with all documents to:**

**The Coordinator (COTRTS-DOES)**

**COTR Theological Seminary**

**Box – 3, Dorathota, Bheemunipatnam,**

**Visakhapatnam, Andhra Pradesh, India -531163**

Phone:08933-200182, 7674940734

E-mail: [cotr-does@cotr.in](mailto:cotr-does@cotr.in), [director4cotrtsdoes@gmail.com](mailto:director4cotrtsdoes@gmail.com),

Website: [www.cotr.in](http://www.cotr.in)