



THE THURMAN KING SCHOOL OF BLACK CHURCH LEADERSHIP

APPLICATION FOR ADMISSION

PLEASE PRINT OR TYPE

Full Legal Name _____
Last First Middle Preferred Name

Address _____
Street City State/Province Zip/Postal Code Country

Phone: Home (____) _____ Work (____) _____ Fax (____) _____

Email _____ Social Security # _____ - _____ - _____

Previous name used on academic records _____

Country of Birth _____ Country of Citizenship _____ Legal Residence _____

When do you wish to enroll?

Fall Term 20_____

DENOMINATIONAL INFORMATION

Current Denominational Affiliation? _____

Are you seeking ordination? _____ Do you have the approval of your judicatory to enter this program? _____

Are you currently in charge of a congregation? _____

CURRENT EMPLOYMENT

Current Occupation/Title	Present Employer		
Employer's Address: Street	City	Zip/Postal Code	Country
Position	For How Long?		

PREVIOUS EDUCATION

<u>ALL</u> Universities/Colleges Attended	Location	Dates From To	Degree Earned and Major	Graduation Date

Have you previously applied for admission to Colgate Rochester Crozer? No Yes

If yes for what program did you apply? _____ Date applied _____

Have you previously enrolled at Colgate Rochester Crozer? No Yes

If yes, past enrollment status: Degree-Seeking Student Non Degree Seeking Student Other _____

Dates attended _____ Program/Major _____

Degree earned M.A. M.Div. Date earned _____

List your academic honors, awards, scholarships or publications, if any.

List your credentials and/or certificates held, if any.

Have you ever been convicted of a felony? No Yes

If yes, please explain _____

List the name of the person whom you have asked to send a recommendation. This should be an individual in a position to evaluate your personal character, leadership potential and academic performance (e.g., pastor, priest, judicatory official, professor). If you are seeking licensing in your denomination as a result of completing this program, the recommendation should come from the person in charge of that licensing process.

1. _____

If admitted as a student, I agree to abide by the rules, policies and procedures of Colgate Rochester Crozer Divinity School. I do understand and agree my admission is dependent on the school's judgment of whether I meet the standards and criteria for admission. I certify that the information contained herein is true and accurate.

Applicant's Name _____

Applicant's Signature _____ Date _____

The school does not discriminate in the administration of its admissions or educational policies, scholarship programs, nor in any other school-administered program on the basis of race, sex, color, national or ethnic origin, or handicap.

Return this completed application to:

Mrs. GP Dickerson-Hanks, Administrative Assistant
The Thurman King School of Black Church Leadership
Colgate Rochester Crozer Divinity School
1100 South Goodman Street • Rochester, New York 14620-2589
(585) 340-9651
Gdickerson-Hanks@crcls.edu
www.crcls.edu

