For office use only, Regn. No……..

Course ……..
Received On ……
Admission Given ……
Joined on……..

HARVEST MISSION BIBLE COLLEGE & SEMINARY

Harvest Mission Centre ,Pongode,Parandode P.O
Trivandrum - 695542, Kerala
e-mail: harvestmbc@gmail.comPhone: 9400554833, 9495726850

APPLICATION FOR ADMISSION

Note: Please take a print and fill up this from carefully in your own handwriting, and send to the Registrar Harvest Mission Bible College & Seminary, Pongode, Parandode P.O, Trivandrum, Kerala, last by March 25 with all required documents in the page of admission (application procedures)

1. Name (in capital letters) :……..

2. Age :……

3. Sex (Male/Female) :……

4. Date of birth according :……..

To school/church records :……

5. Aadhaar Number :…… 6. Nationality :……

7. Place of Birth …… Village/Town…… State ……..

8. Mother Tongue ……..

9. Other Languages

a) 1. …….. Speak ☐ Read ☐ Write ☐
b) 2. …… Speak ☐ Read ☐ Write ☐
c) 3. …….. Speak ☐ Read ☐ Write ☐

10. Permanent Mailing Address (in capital letters)

Street :……..

Vill/Town :……

District : …….. State:…… PIN Code :……

Whats App Number:…….. Email ID:……

11. Present Mailing Address (in capital letters)

Street :……..

Vill/Town :……..

District : …….. State:…… PIN Code :……..

Email ID:……

12. Name of Father/Guardian (Capital letters) :……

Name of Mother (Capital letters) :……

Mailing Address of Father/Guardian :……

Name…… Occupation……

No. Street …… Village /Town ……

District…… State…… PIN Code ……

Mobile Number…… E-mail …… Whats App No ……

13. Local guardian (if any), or nearest relative or close acquaintance to be notified in case of an emergency

Name …….. House No ……

Street name …… Area…… Town/City ……

Mobile Number …… E-mail …… Whats App No ……

14. Relative(s) studied or studying in this college

Name …… Relation ……

Mobile Number …… E-mail …… Whats App No ……

15. Marital Status : Single ☐ Married ☐

16. Health status

Are you in good health at present? Yes ☐ No ☐

Health Aspect	Status	Remark
Physical Health	good/fair/poor	
Mental Health	good/fair/poor	
Overall Health	good/fair/poor	

17. Do you have any Physical disabilities or mobility issues? Yes ☐ No ☐

If Yes, then mention the type of disability ……

……

18. Have you undergone any major surgery? Yes ☐ No ☐

If yes, mention the nature of surgery/therapy ……

……

19. Provide an autobiographical statement on a separate sheet of paper with special reference to your personal calling to ministry and decision to pursue theological education

20. Have you been baptized? If yes, when?

21. Denominational Affiliation :……

22. Member of which local church : …… Place : ……

Name of Pastor ……

23. Christian ministerial experience, if you have any (give details) ……

1. ……

2. ……

24. Professional Experiences, if any ……

1. ……

2. ……

25. Connection with Harvest Ministries (if any)……

……

26. Academic and professional qualification. (Attach photocopies of the documents such as degree, diploma certificates, mark transcript etc……)

Institution and Place of Study	Attended From/to	Name of Certificate/ Diploma/Degree Received	Grade	Year/month

27. What is your special gift(s) in Ministry (be specific)

1. ……

2. ……

3. ……

28. Do you have any talent in Music/Musical instruments/singing? ……

29. State your reason(s) for choosing HMBCS for your theological education ……

……

30. State your purpose in coming to HMBCS ……

……

31. Do you use tobacco, drugs, Alcoholic drink? Yes ☐ No ☐

32. Programme to which you seek admission? BTh ☐ MDiv ☐

33. Do you have any definite call for full time ministry Yes ☐ No ☐

34. Are you willing to abide by rules and regulations of HMBCS Yes ☐ No ☐

35. Give name and full postal address of two dignitaries as references preferably your pastor, another professional/ teacher, Christian leader, and request them to complete the letter of references and return it to you in a sealed envelope with his signature across the flap. (Address must include phone No. and E-mail ID if any)

1. Name …….. Position ……

   Address ……

   ……

   Phone …… E-mail …….

2. Name …… Position …….

   Address ……

   ……

   Phone …… E-mail …….

DECLARATION

I declare and confirm that the information given in this application is accurate and I promise that if admitted to HMBCS, I will conduct myself at all times, abide by all rules and regulations of the college, be faithful and diligent in my studies so as to fulfill the purpose of my joining HMBCS.

Place ……..

Date ……

_____ _____

Signature of Parent/Guardian Signature of the Applicant

APPLICANT'S CHECKLIST

(Make sure you have met/enclosed all requirements listed below. Put in the boxes if you have completed the requirement)

- Duly filled in application form.
- Academic Certificates and mark lists of 10th , Plus 2, Degree etc. (original should be submitted at the time of registration)
- Recommendation letter from the local church.
- Medical Certificate in the prescribed form.
- Personal Testimony of the applicant.
- Reference letter (must be filled in by the referee with his signature. He can either put filled reference letter in sealed envelope and return it to the applicant or send directly to the college)
- Two passport size photos.

(Please do remember, application which do not accompany the above documents will not be considered for admission)

FOR OFFICE USE ONLY

Date of Admission : ……..

Name of the Course : ……..

Academic Dean **Seal** **Registrar**