**KRISTU JYOTI COLLEGE**

Please affix your photo here

**Department of Theology**

(Aggregated to the Faculty of Theology of the Pontifical Salesian University, Rome)

**Bosco Nagar, Krishnarajapuram Bengaluru 560036.**

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***By Your Light***

***We See The Light***

Application No:

# The Master of Theology (M.Th.) Course

**APPLICATION FOR ADMISSION**

**………………………………………………...............**

(Please use **BLOCK LETTERS**)

1. Surname .........................................
2. Name(s)..........................................

03. Your Name in the Religious Congregation/Diocese ................................................

(if you have a *different* name)

1. Specify whether diocesan/religious priest, religious brother, religious sister or lay person.

 (Tick the appropriate one)

05. Date of Birth (As in your SSLC book): Day............Month .................. Year ............

06. Place of Birth ........................................................................

07. Parish of Origin .........................................

08. Diocese of Origin ..........................................

09. Religious Congregation/Diocese................................

10. Province (if Religious) ...........................................

11. Name of the Superior/Bishop.....................................................

 12. Designation (e.g. General / Provincial/Bishop etc.) of the Guardian / Point of Reference, to whom future

 communications may be sent ...............................................................................................................................

13. Address of the Guardian / Point of Reference

 …………………………………..…………..........................................................................................................

..............................................................................................................................................................................

Mobile: .................................... Phone No:..........................................

E-mail: .....................................

1. Address of the Applicant:

a) Permanent:.........................................................................................................................................................

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Mobile......................................................... Phone No: .....................................

E-mail: ........................................................

b) Local:..............................................................................................................................................................

............................................................................................................................................................................

Mobile......................................................... Phone No: .......................................

E-mail: ........................................................

1. Educational Qualifications (University Studies, Philosophy, Theology etc.) (Please specify Course, Institution, Place & Duration)

a)..............................................................................................................................................................………...…………………………………………………………………………………………………………………....

b)...............................................................................................................................................................................…………………………………………………………………………………………………..........................

c).............................................................................................................................................................................................................................................................................................................................................................

d).............................................................................................................................................................................................................................................................................................................................................................

1. PresentApostolate/Status..........................................................................................................................................
2. Specify your specialisation in MTh: Catechesis / Youth Ministry / Liturgy (tick the appropriate one)
3. Documents attached (Tick the ones attached to this form)

[ ] Two attested copies of the marklist and Certificate of the Philosophy Course

[ ] Two attested copies of the marklist and Certificate of the Theology Course

 [ ] Two attested copies of the Pre-Degree Course Certificate or its equivalent

 [ ] Two attested copies of the B.A. Certificate or its equivalent

 [ ] Letter of Recommendation of the Provincial / Religious Superior/Bishop for Diocesan priests

 [ ] Photographs (four of passport-size and five of stamp-size)

Date: ............. ………………………………………….......

Place: .......... Signature of the Applicant

(Signature & Seal of the Guardian)

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Note:

## Requirements for Admission:

Those who have not obtained a degree in Theology should have:

* 1. completed a two/three year course of Philosophy in a religious studentate or major seminary; OR, in the case of non-ecclesiastical students, a B.A. Degree or its equivalent, and an adequate course of philosophical reflection in a recognized institute;
	2. completed the B.Th. Course in a studentate of theology or seminary; OR a three-year course of theological reflection. Those who do not possess a recognized Bachelor of Theology (B.Th.) Degree will be required to undergo a qualifying examination.

The College reserves to itself all rights to admission

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## (For office purposes only)

## Admission No: