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Master of Arts in Christian Studies

Application Form 20..... -

Passport Size Picture

Personal Details					
First Name:		. Last Name:			
Gender: ☐ Male	☐ Female	Nationality:			
Date of Birth:		. Place of Birth			
	Contac	ct Information			
Permanent Address: .					
		. Email Address			
Family					
Marital Status: ☐ Sing	le	Name of Spouse:			
Names of Children and	d (Age):				
Church Affiliation					
Denomination:		Date of Baptism:			
Church Membership:					
Sending Organization:	:				
		nce Courses			
If you prefer residentia	al studies, do you intend to co	ome: □ single □ with family - How many persons?			

Schooling History: (please attach a copy of the original certificate) Minimum qualification is a Bachelor degree in Theology or equivalent.

Year	School attended	Degree	Division
	Additional Training Eyne	riences: (please attach a copy of the original ce	rtificata)
1	Additional Framing Expe	ricitees. (please attach a copy of the original ce	runcate)
Year	Program	Organisation	
	_		
	L	I	
Present	Occupation:		
0	diam / Channel	Contact Dhama Nambar	
Organisa	tion / Church	Contact Phone Number	
	Church	h Ministry Experience:	
	3.14.1		
	v	Vork Experience:	
	W	Vork Experience:	

Personal Faith Statement and Purpose for MA Study

(Please answer the following three questions on a separate sheet)

- 1. Write an Essay (one page) about your Christian faith and conviction?
- 2. What is your main purpose for this MA study?
- 3. How do you intend to apply your MA studies? What is your vision for your ministry?

Finances			
Will you receive financial support for your expenses (tuition, food and	l accommodation)?	□ yes	□ ne
If so, please provide details from whom:			
Amount of			
Please also attach a recommendation letter from your Pastor / Presbyter	r / Bishop, NGO CEO	or Mission F	Iead
Date: Applicant Sign	nature		
Please send the completed application to the Dean of MA Studies. Jale 1343 or	shwar Rd, Savar, Dha	ka	

via Email to Rev. Rowel Mazumder < cctbadmission@gmail.com, rowelmozumder@yahoo.com >