Image: Strain of the strain		(FORM-A)		
		aland	A recent Photograph	
Admission sought for BD as $(\sqrt{One})$				
Secular Gradua	ate 🗌 Under Grad	uate Theolo	gical Graduate	
	Please fill the form in	n BLOCK LETTERS		
1. PERSONAL PARTICULARS				
Male Female	Sir	ngle	Married (Marri	age certificate to be enclosed)
First Name (as per the academic record) :				
Last Name :		•		
Date of Birth :		Tribe:		
Father's Name:		Occupation :		
Mother's Name:		Occupation:		
Permanent Address:				
State:	Pin code:		Country:	
Corresponding Address:				
Telephone no:		Email id:		
Spouse Name (if married)		No. of Children:		
Name of your local Church:		Denomination:		
Address of your local church : Mother Tongue:				
moulei Toligue.				

Personal testimony and commitment to service (about 200 words)

[separate sheet of paper to be used]

## 2. ACADEMIC RECORDS

i. HSCL	till recent highest degree:	
Sl. No.	EXAMINATION /INSTITUTION PASSED	UNIVERSITY/BOARD PASSED

## FINANCE

PLEASE STATE THE SPONSOR FOR YOUR STUDIES

- SELF/FAMILY/PARENTS
- GUARDIAN
- ASSOCIATION/ORGANISATION
- CHURCH
- OTHERS

(Financial guarantee letter by the sponsor to be duly filled and enclosed)

	<b>TRINITY THEOLOGICAL C</b> Affiliated to the Senate of Serampore Co	
	Post Box- 168, Thahekhu, Dimapur-797	/112, Nagaland
	<b>MEDICAL FITNESS CERT</b> Please fill the form in BLOCK LETTERS wit	_
NAME:		
BLOOD GROUP	EYESIGH	T RIGHT/LEFT
MEDICAL HISTORY		
KNOWN DISEASE		
KNOWN MEDICAL ALLERG	IES	
KNOWN PREVIOUS SURGER	Y	
GENERAL REMARKS		
		examined Mr. / Ms
	has any disease (communicable or otherwise), c	constitutional weakness or bodily infirmity
I consider him/her physically an	d mentally Fit/ Unfit for studies as a residential	student. His/ her age according to her statement is
	and by appearance about	years.
DATE		PHYSICIAN'S SIGNATURE
DATE	SEAL	THI SICIAN 5 SIGNATURE
PLACE		NAME

	<b>TRINITY THEOLOGICAL COLLEGE</b> Affiliated to the Senate of Serampore College (Universibility Post Box- 168, Thahekhu, Dimapur-797112, Nagaland	
	<b>FINANCIAL GUARANTEE FORM</b> Please fill the form in BLOCK LETTERS with blue or bla	ck pen
NAME OF THE STUDENT		
COURSE OF STUDY	DURATION	
	t for the full course study in Trinity Theological College.	will financially
NAME		
POSITION/DESIGNATION/RE	ELATION WITH THE STUDENT	
FOR/ON BEHALF OF (with sea	al of the organization/institution)	
SIGNATURE		
SEAL		

## DECLARATION

I\_\_\_\_\_\_, hereby declare that the particulars given above are true to the best of my knowledge. I also solemnly pledge before God and witness that I will abide by the rules and regulations of the college. I shall promote and maintain the spirit of unity and love in the institution, I shall diligently study to be well equipped for God's ministry.

## UNDERTAKING BY STUDENTS AND PARENTS/GUARDIANS

- 1. My/our ward is above 18 years old and is responsible for his/her own actions.
- 2. My/our ward is not enrolled/will not enroll in any other college/institution during his/her study at Trinity Theological College.
- 3. My/our ward is not employed in any Government or private establishment.
- 4. I am legally and morally responsible for any actions for which the college reserves the right to take any action deemed appropriate without any prior information to the parents/guardians.
- 5. I declare that the college administration reserves the right in their judgment for any disciplinary action if my doctrine is contrary to the spirit and statement of the institution.
- 6. Any information to parents/guardians with regard to disciplinary action will be intimated through postal service.

SIGNATURE	OF THE	APPLICANT
JULIUNE	OF THE	

SIGNATURE OF THE PARENTS/GUARDIANS

WITNESS: PASTOR AND A MATURED PERSON

NAME

NAME

SIGNATURE

SIGNATURE

Please read the checklist and tick before you submit to make sure you have enclosed all the
required documents.

REQUIREMENT CHECKLIST
Duly filled and signed application form
Personal testimony and commitment to service (about 200 words)
Pastor's recommendation letter from the local church
Recommendation letter from the Executive Secretary/ Bishop
Duly filled and signed financial guarantee form by the sponsor
Duly filled and signed medical fitness certificate
Photocopies of the following documents:
+12 DOB certificate, or Class X admit card, + Mark sheet and Admit card, +12 pass Certificate
Graduate DOB or class X Admit Card, +12 Mark sheet and Admit Card, BA/B.COM/B.Sc – Mark sheet and Degree Certificate from the University
Baptismal certificate (Photocopy)
Marriage certificate (if married)
DD amount of Rs 300 in favor of TRINITY THEOLOGICAL COLLEGE (In case of submission by postal service/online)
FOR OFFICE USE ONLY
DATE OF ISSUE DATE OF RECEIPT
DOCUMENTS: 1. COMPLETE 2. INCOMPLETE
APPLICATION: 1. PAID2. DUE
ADMISSION: 1. APPROVED 2. NOT APPROVED
NOTE

\*Please make sure the form is correctly filled and all required documents and certificates enclosed. \*Incomplete application will be REJECTED.

\*All original documents are to be produced during entrance test and admission

\*Rs. 300 to be paid during submission of forms.