

Calvary Theological Training Center

538 Rugh Street • Greensburg, PA 15601

724.837.8898 • Fax 724.836.7472 • www.cttc-online.com

APPLICATION FOR ADMISSION

Mr. Mrs. Ms. Rev. Dr. Date: _____

Name: _____ SSN# _____ - _____ - _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone:(day) _____ (evening) _____

Email: _____ Fax: _____

Date of Birth: _____ Sex: Male Female

Marital Status: Single Married Divorced Widowed

Religious Preference: _____ Are you a member? Yes No

Do you serve in a church position? Yes No Position: _____ How long? _____

Pastor's Name: _____ Pastor's Phone: _____

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Academic History

High School/College/University/Seminary/Trade & Business Schools

Name of School	Graduation Date	Degree	Credits Earned

(please attach extra sheets as required)

Information for Life & Ministry Experience

List Ministry/Professional Experience. Please include dates and/or responsibilities and years of ministry and whether full or part time. Make sure to include all training, seminars, workshops, etc...

(please attach extra sheets as required)

Copies of transcripts, as applicable, need to be enclosed with application or sent for by the student. Student held transcripts are acceptable for evaluations but official transcripts sent directly from former institutions are required within ninety days of enrollment.

Program Selection:

Certificate Program	Associates Degree Program	Bachelor Degree Program
<input type="checkbox"/> Certificate of Achievement	<input type="checkbox"/> Associate of Biblical Studies	<input type="checkbox"/> Bachelor of Biblical Studies
<input type="checkbox"/> Certificate of Christian Studies	<input type="checkbox"/> Associate of Christian Education	<input type="checkbox"/> Bachelor of Christian Education
<input type="checkbox"/> Certificate of Biblical Studies	<input type="checkbox"/> Associate of Theological Studies	<input type="checkbox"/> Bachelor of Theological Studies
	<input type="checkbox"/> Associate of Pastoral Ministry	<input type="checkbox"/> Bachelor of Pastoral Ministry

Application Fee is \$50 (non refundable)

(Make checks payable to: Calvary Theological Training Center)

I am paying the \$50 Application Fee by: _____ check _____ credit card _____ debit card

Card Type: VISA MasterCard Discover Card Number

Expiration Date: _____ / _____ Name as it appears on card: _____

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I have read and agree to the policies as stated in the Calvary Theological Training Center Student Academic Catalog:

Applicant's Signature

Date

Withdrawal/Refund Policy:

Textbook and registration fees will not be refunded. Tuition will be adjusted on the following percentages. The student may request a withdrawal (in writing) during the first week after their acceptance/enrollment in C.T.T.C. and receive a full refund. After that date, the following refund policy applies:

- Within 15 (fifteen) days from the date of enrollment—90% refund
- Within 30 (thirty) days from the date of enrollment—80% refund
- Within 45 (forty-five) days from the date of enrollment—50% refund
- Within 60 (sixty) days from the date of enrollment—30% refund

After 60 (sixty) days from the date of enrollment students are not eligible for a refund. Refundable tuition (if any) will be paid within 30 (thirty) days. The withdrawal date is the date the written notification is received by C.T.T.C. This date will be used in calculating the amount of tuition of refunded.