

Kindly note the following requirements for the B.D. Degree Course before applying

REQUIREMENTS FOR B.D. DEGREE

Kindly send to the Bursar, U.T.C. Rs. 400/- for B.D. application form by M.O./DD or Cheque towards the cost of application and Rs. 50/- postal charges.

- 1) Candidates with a B.A., B.Sc., or B.Com. (or higher) degree of recognized University (or equivalent qualification) are qualified for admission to the course leading to the B.D. Degree/Diploma in Theology.
- 2) Candidates, with a B.Th. Degree (with B grade or above) of Serampore College (or an equivalent qualifications), are qualified for admission to the third year of the B.D./Diploma in Theology Course, provided they have passed the two B.Th. Senate examined English papers before applying for admission.

Last date to receive the filled in **B.D. Application Form without Late Fee:**

November 17, 2017

Last date to receive the filled in **B.D. Application Form with Late Fee of Rs. 500/-:**

November 24, 2017

With all good wishes,

Yours sincerely,

Sd/-

(Rev.Lalfakzuala)

Registrar

P.S. Prospectus is under Revision

If the candidate is married, send the family photo along with your application form.

**THE UNITED THEOLOGICAL COLLEGE, BANGALORE- 560046
DIVISION OF GRADUATE STUDIES**



Application Form for Admission

Courses Offered
B.D./ Special

Photo

In the space above enter the name of the course for which admission is sought

1. **Name of applicant in full:**.....
(Underline Surname)

2. **Name of the Parent or Guardian & Occupation:**.....

3. **Permanent address (with Telephone No, Mobile No. & Email ID):**.....
.....
.....

4. **Present Address (with Telephone No, Mobile No & Email ID):**.....
.....
.....

5. **Date of Birth:**.....

6. **Married or unmarried:**.....
(If single, whether planning to get married during study period? When?)
If married, date of marriage)

7. **Academic qualifications** **Degree** **Class** **Institution/University** **Year**
(List in the order of passing the examination with the class, Institution/University and the year of passing. Attach attested copies of Degree Certificates)

8. **Mother Tongue:**.....

9. **Medium of your higher education:**.....

10. **Other Languages studied and the number of years of each:**.....

.....

11. **Indicate past and present work experience with data:**

a) **Church:**.....

b) **Secular:**.....

12. **Church (Denomination) of which you are a member:**.....

.....

13. **Length of communicant membership:**.....

(Enclose a letter from your Pastor or Presbyter
indicating the status of your membership)

14. **a. Are you a sponsored candidate of your**

Church?.....

b. **If so, give the name and address
of your Bishop, or similar authority
responsible for your candidature**
(Enclose a letter from such authority
sponsoring your candidature)

c. **Is your Church a member of UTC Council?**.....

15. **a. Are you a sponsored candidate of an Agency
such as:**

College/Institution/Organisation?.....

b. **If so, give the name and address
of your Agency responsible for
your candidature** (Enclose a
letter from such authority sponsoring
your candidature)

16. **Are you an independent
candidate?**.....

17. **Person(s) responsible for your financial support while in the College:**.....
(Enclose a letter from the Church authorities/Head of the Institution/or others who would ensure responsibility for your financial support)

18. **Names and addresses of four persons who can supply confidential information about you.**

These persons shall be:

a. Bishop, District Chairman or similar authority who is authorised to speak on behalf of the Church/Agency to which you belong:

b. Your Pastor, Presbyterian or Chaplain:

c. A lay person responsible in your Church:

d. A teacher under whom you studied in College:

19. **Give a brief auto-biographical statement on a separate sheet of paper with special reference to those influence significant for your decision to pursue theological education.**

FOR THE APPLICANTS WHO ARE MARRIED

20. **Husband/Wife’s Name:**.....

21. **Is he/she employed? If so, the nature and length of his/her service and emoluments:**.....

.....
.....

22. **Is he/she intending to do Theological studies at UTC? (If the spouse is eligible):**.....
(e.g. CCS/DCS/Diploma in Counselling, B.D. etc.)
Persons intending to do Diploma in Counselling or B.D.should send in their applications along with the spouse’s applications)

23. **Highest examination he/she has passed:**.....
(Give Place and Year)

24. Number and ages of Children

	Name	Age	Class
1.....			
2.....			
3.....			

25. Would you be able to join if family quarters are not available?:.....
 (We have only limited number of family quarters available)

If admitted, I promise to pay the fees to the College at the prescribed dates and also to abide by the rules and regulations of the College faithfully.

Date:

Signature of the Applicant

.....

DOCUMENTS THAT MUST BE INCLUDED WITH THE APPLICATION FORM

No application will be considered unless the following documents are enclosed:

1. D.D./Cheque for Rs. 400/- (Student from other countries - \$ 8/-) for all those who use downloaded Application Form. Those who purchased the Application Form from the office should attach the receipt as a proof of payment.
- 2.. Attested copies of Degree Certificate, Transcript of Record. (See 7 above)
3. A letter from your Pastor or Presbyter indicating the status of your Church membership (See 13 above)
4. A letter from your Bishop/Church Authority/Head of the Institution indicating that you are a sponsored candidate.(For sponsored candidates only) (See 17 above)
5. Letter from those guaranteeing financial support. (See 14/15 above)
6. Health Report
7. Autobiographical statement (See 19 above)
8. Two extra passport size photographs.

When filled up this form, together with the required documents, should be sent to:

**The Principal,
 The United Theological College,
 Post Box 4613,
 63 Miller’s Road, Benson Town
 Bangalore - 560 046**

Tel. Nos. Principal : 23332844 General : 23333438, 23330502
Fax: 91-80-23330015, E-mail: unitedtcb@gmail.com Website: www.utc.edu.in
Blog: www.utcbangalore.blogspot.in

UNITED THEOLOGICAL COLLEGE, BANGALORE
Health History to be Completed by the Candidate before Medical Examination

FAMILY HISTORY Note if there any History of

- 1) HIGH BLOOD PRESSURE
- 2) MENTAL ILLNESS OR T.B.
- 3) HEART TROUBLE

	ANY ILLNESS	IF DEATH	CAUSE OF DEATH
1. Father			
2. Mother			
3. Sister / Brother			
4. Wife / Husband			

Medical History (Indicate dates for any of the following conditions you have had)

- | | |
|----------------------------------|-------------------------|
| 1. Typhoid | 2. Malaria |
| 3. Jaundice | 4. Dysentery |
| 5. Diptheria | 6. Chicken Pox |
| 7. Mumps | 8. Filariasis |
| 9. Joint Pains | 10. Rheumatic Fever |
| 11. Recent loss / gain in weight | 12. Pleurisy |
| 13. T.B. | 14. Tonsillitis |
| 15. Easy Fatigue | 16. Hernia |
| 17. Piles | 18. Shortness of Breath |
| 19. Heart Trouble | 20. High B.P. |
| 21. Asthma | 22. Diabetes |
| 23. Appendicitis | 24. Stomach Trouble |
| 25. Skin disease | 26. Eye Problem |
| 27. Discharging Ears | 28. Backache |
| 29. Deafness | 30. Nervous Breakdown |
| 31. Depression | 32. Sleeplessness |
| 33. Lack of Confidence | 34. Fainting Spells |
| 35. Dizziness | 36. Fits |
| 37. Inability to Concentrate | |

FOR WOMEN ONLY

1. Menstrual Irregularities
2. Pregnancies
3. Present or Past Treatment for Female Disorders

Any Operation or Injuries

Any Deformities

Medication being taken and date and dosage:

I certify that I have answered the above questions fully and honestly and there are no other significant health facts known to me.

Date:

Name and Signature of the candidate

PHYSICIAN'S EXAMINATION

ENT	Height	Weight	General Appearance
	EYES	Visual acuity	Distant Vision Near Vision
	PUPILS		
	Eyes Lids Glands	Hearing Cervical	Nose & Throat Skin Rash Scars
		Axillary Inquinal	
Circulatory System	B.P.		Pulse
		Peripheral Pulses Vericose veins	
ORTHOPAEDIC		Posture Spine Hand & Feet	Gait
RESPIRATORY INSPECTION		Lungs Liver Spleen Hemia	Teeth and Gums
	Abdomen		
NERVOUS SYSTEM			Higher Function Speech Motor Reflexes Any other abnormality
EMOTIONAL STABILITY	Evidence of psychiatric disorders		
LOBORATORY EXAMINATION	Stool	Urine	
	H.B.%WMCT P..... L..... M..... E..... B		
	Yellow Fever		
Blood Group			
CHEST X-RAY			
Summary of current findings			
FITNESS FOR STUDY	Do you consider that the candidate has any physical condition which would seriously interfere with his/her carrying out a rigorous programme of study.		
	Physician's Signature.....		
Date:.....	Post & Qualification.....		
	Address:.....		

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THE UNITED THEOLOGICAL COLLEGE: BANGALORE

CHURCH SPONSORSHIP FORM

This is to certify that Mr./Mrs./Miss/Rev.:..... from
 members of has been sponsored by
 our Church/Institution for BD/ BRE/ DRK/ M.TH./ Studies at (the United Theological
 College, Bangalore. By Sponsorship we mean: (Please indicate one of the following
 statements by ticking

- 1. We will support the candidate financially during his/her studies for this
 Degree/Diploma, Intend to employ him/her upon the completion of his/her
 studies at U.T.C.
- 2. We will support the candidate financially during his/her studies for this
 Degree/Diploma, but we may not employ him/her upon the completion of
 his/her studies at U.T.C.
- 3. We intend to employ the candidate upon the completion of his/her studies at
 U.T.C., but are unable to support him/her financially during his/her
 studies.
- 4. We recommend the candidate for studies at U.T.C., but are unable either to
support him/her financially during his/her studies at U.T.C. or to employ
 him/her upon the completion of his/her studies at U.T.C.

.....
 (Signature)

BISHOP/PRESIDENT/DIRECTOR
 NAME OF CHURCH/INSTITUTION

DATE:.....

OFFICIAL SEAL: