

ENROLMENT INFORMATION

Study Program /Course applying for

MA in Christian Studies

Certificate in Christian Studies

MA in Christian Apologetics

M.Div

An Individual Course

Post-Graduate Diploma in Christian Studies

APPLICATION INFORMATION

How did you come to know about HITHA?

Please list any three reasons why you chose to apply to HITHA?

1. _____

2. _____

3. _____

CHURCH INFORMATION

Home Church: _____

Pastor's Name: _____

Address: _____

City: _____ State: _____ Telephone(s): _____

Denomination: _____ Church Website: _____

Role in the Church: _____ Length of Membership: _____

EDUCATIONAL INFORMATION

Please list information for all postsecondary institutions attended (beyond high school)

Most recent degree(s)	College/University	State & Country	Percentage / Letter Grade	Year of Graduation

Recent continuing educational work:

EMPLOYMENT INFORMATION

CURRENT EMPLOYMENT:

Category of work (please choose the nearest)	Address of the Employer:
Key Responsibilities:	Company/Organisation (Name):
Job Title:	Date of Commencement:

PREVIOUS EMPLOYMENT:

Job Title	Responsibilities	Organisation	Country

PERSONAL AFFIRMATION

I _____ (*Applicant's Name*)
declare that all the information given in this form by me is true and complete , and accurate to the best of my belief and knowledge and I understand that any information furnished above, if proven false or incorrect, will automatically disqualify me from being admitted to, or continuing at HITHA. I solemnly pledge to observe all regulations and maintain high academic standards of the institute and maintain a high standard of Christian code and conduct and a spirit of unity and love.

Signature:

Date:

Place:

STATEMENT OF COMMITMENT TO CHRIST

I _____ (*Applicant's Name*)
hearby affirm that I have accepted Jesus Christ as my Saviour and Lord and have surrendered my life for
all that HE desires to do in and through me for HIS glory.

Signature:

Date:

Place:

FOR INTERNAL USE ONLY

Study Programme/Course(s) Applied for:	<input type="checkbox"/> Accepted
Application Received on:	<input type="checkbox"/> Rejected
Remarks:	
Reason if rejected:	
Registrar's Signature and Date:	

FEE DETAILS

Amount:	
Receipt No & Date:	