



JAMAICA THEOLOGICAL SEMINARY

P.O. Box 121, 14-16 West Avenue, Constant Spring, Kingston 8, Jamaica W.I.

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E-MAIL: admissions@jts.edu.jm , WEBSITE www.jts.edu.jm

ASSOCIATE DEGREE PROGRAMME APPLICATION FORM

INSTRUCTIONS: PLEASE COMPLETE ALL SECTIONS OF THIS FORM
Answer ALL sections in **BLOCK CAPITALS...NO SCRIPT WRITING PLEASE**
One (1) recent passport size photograph should accompany this form.
Attach all supporting documents (eg. Transcripts, CXC/GCE passes etc.)
A non-refundable miscellaneous fee of JA\$2000 must accompany this application.

**Affix
Recent
Passport Sized
Photograph**

SECTION A: PERSONAL DATA [Please write in capital Letters]

1 LAST NAME	FIRST NAME	MIDDLE NAME
DATE OF BIRTH (DD/MM/YY)	GENDER MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	TRN:
EMAIL ADDRESS:	NATIONALITY	MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common-Law <input type="checkbox"/> Other

2. Do you have any disability? No Yes (please specify) _____

3 MOBILE NUMBER	HOME NUMBER	
4 PERMANENT ADDRESS	5 MAILING ADDRESS (if different)	

6 LAST NAME (NEXT OF KIN)	FIRST NAME	RELATION	TELEPHONE NUMBER
LAST NAME (IN CASE OF EMERGENCY)	FIRST NAME	RELATION	TELEPHONE NUMBER

7 PLACE OF EMPLOYMENT	TELEPHONE NUMBER/S

SECTION B: PROGRAMME/SEMESTER/STUDY OPTION

8 PROGRAMME FOR WHICH YOU ARE APPLYING

- | | | |
|--|--|--|
| <input type="checkbox"/> Digital Animation | <input type="checkbox"/> Construction Site Management | <input type="checkbox"/> Logistics and Supply Chain Management |
| <input type="checkbox"/> Fitness Management | <input type="checkbox"/> Motor Vehicle Insurance Loss Management | <input type="checkbox"/> Renewable Energy Technology |
| <input type="checkbox"/> Biblical Studies | <input type="checkbox"/> Business Process Outsourcing | <input type="checkbox"/> Electronics & Computer Technology |
| <input type="checkbox"/> Psychology | <input type="checkbox"/> Applied Behaviour Analysis | <input type="checkbox"/> Music & Media |
| <input type="checkbox"/> Social Work | <input type="checkbox"/> Human Services/General Studies | <input type="checkbox"/> Integrated Marketing Communications |
| <input type="checkbox"/> Leadership & Ministry | | |

State the semester and year you intend to commence your programme

- August 20 (____)
- January 20 (____)

Preferred Mode of Study

- Full time (Face to Face)
- Part time (Face to Face)

9 SECTION C: EDUCATION BACKGROUND

SECONDARY INSTITUTION ATTENDED	SUBJECTS TAKEN	GRADE OBTAINED	DATE AWARDED	EXAMINATION BODY (CSEC, City & Guild etc.)

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SECTION D: REFERENCES

Please submit two completed reference forms of the following persons:

- Your **current** Minister of Religion or Justice of the Peace,
- An academic advisor or lecturer/tutor,
- Employer or professional colleague (if applicable).

SECTION E: DECLARATION

- My signature certifies that I have read, understood and agreed to the terms and conditions of this application and further agree to abide by the policies, rules and regulations of the institution.
- I understand that withholding information requested or falsification of information given may result in disciplinary action or make me ineligible for admission and enrolment.
- I also understand that the Seminary reserves the right to suspend or dismiss any student at anytime for disciplinary misconduct or when such action is deemed to be in the best interest of the student and student body.

APPLICANT'S SIGNATURE

DATE