

EVANGELICAL THEOLOGICAL COLLEGE (ETC)

P. O. box 5773

Telephone 011 371 20 73

E-Mail etccollege@ethionet.com Website: www.etccollege.org

Student Application for Admission

(EB100.00 Application Fee must be attached to this form to be processed)

Attach Two
Photos Here

Personal Information

Full Name (Please print) _____
 Your Name _____ Your Father's Name _____ Your Grandfather's Name _____

Nationality _____

Birth Place _____
 Country _____ Town/City _____

Date of Birth (G.C.) _____ / _____ / _____
 Month / Date / Year

Address _____
 Town/City _____ Wereda _____ Kebele _____ House No. _____ Phone (Mobil) _____

Phone (office) _____

P. O. Box _____

E-Mail _____

Marital Status: Single Married Widowed Divorced Remarried

Spouse's Name (if married) _____

Your Occupation/Ministry _____

If you have an employment who is your Employer? _____

Of which church group/denomination are you a member? _____

Church Address _____
 Town/City _____ Wereda _____ Kebele _____ House No. _____ Phone _____

P. O. Box _____

E-Mail _____

Are you handicapped? If yes, how? Hearing Vision Other please specify _____

Schools

Give a complete record of all schools attended starting from high school (include college, university, Bible institute, seminary, correspondence and other schools).

Name of School	Location	Years attended From To	Degree/Diploma/ Certificate Pursued	Major	Graduated Yes or No
		-			<input type="checkbox"/> <input type="checkbox"/>
		-			<input type="checkbox"/> <input type="checkbox"/>
		-			<input type="checkbox"/> <input type="checkbox"/>
		-			<input type="checkbox"/> <input type="checkbox"/>

Attention! You need to bring the originals of the results of each **ESLCE** (Ethiopian School Living Certificate Examination) that is relevant for the application process with a photocopy for each. The originals will be returned to you.

Application Questionnaire

Which program are you planning to attend? Degree

Note: ETC requires a minimum grade point average (GPA) of 2.0 for the degree programme. The applicants should have five passes including Mathematics and at least "C" in English. If you have completed under the new educational program (10+2), ETC requires you to have a result that will enable you to join Addis Ababa University.

Are you planning to enroll Regular Vacation Online-blended
full time or part time? Full time Part time

Note: Students who are taking four courses and above in a semester are considered to be Full Time and those who are taking three courses and below are considered to be Part Time .

Are you able to cover all your expenses for attending ETC through your own resources or otherwise? Yes No If not, what is your plan? _____

If you are accepted, do you agree to abide by the rules of the College? Yes No

Signature of Applicant _____

Note: The deadline to turn in your application to ETC is April 10, 2021. The entrance exam is on April 17, 2021 at 8:00 a.m.

State in fifty (50) words or less why you would like to enroll in the ETC?

TO BE FILLED BY THE REGISTRAR

THE FOLLOWING ITEMS WILL BE CHECKED BY THE REGISTRAR BEFORE APPLICATION IS CONSIDERED COMPLETE FOR AN ACCEPTANCE PROCESS:

- _____ The originals and photocopies of all ESLCE or 10 +2 results and transcripts that are relevant for the application process
- _____ The originals and photocopies of transcripts of all **post** secondary courses taken
- _____ The originals and Photocopies of certificates, diplomas and/or degrees
- _____ Two current photographs of the applicant (Applicant's name written at the back)
- _____ Applicant's Personal Testimony
- _____ Church Recommendation Form
- _____ Ministry Supervision Form
- _____ Non-refundable application fee of EB 50

ESLCE Results

English _____
Math _____
GPA _____

According to the new Educational Policy

10 + 2 Result: _____
10 + 3 Result: _____

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CHURCH RECOMMENDATION FORM (CONFIDENTIAL)

Note: This form is to be given to the pastor or to one of the elders of the applicant's church. After completing this form, he/she should send it in a sealed envelope by hand or by mail to: The Registrar, ETC, Box 5773, Addis Ababa. The application will not be considered complete without this form.

Name of Applicant _____

Name of Church _____ Denomination _____

Church Address _____
Town/City _____ Wereda _____ Kebele _____ House No. _____ Phone _____

P. O. Box _____

E-Mail _____

How long has the applicant been a believer? _____

Is the applicant a member of your church? Yes No

How long has he/she been a member? _____

In what church ministries is the applicant involved? _____

Has this person been publicly dedicated to the ministry in your church? Yes No

What can you tell us about his or her character? (Write strengths and weaknesses)

Strengths _____

Weaknesses _____

How well does the applicant work under authority? _____

Why do you feel this applicant should attend the ETC? _____

What future ministry or service do you anticipate he or she will have in your church?

I hereby recommend this applicant as a student at the Evangelical Theological College.

Name of person filling in this form _____

Position in the church _____

Signature _____

Date _____

Church Stamp _____

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MINISTRY SUPERVISION FORM

Note: This form must be completed and submitted to the Registrar at ETC before the student can be considered for acceptance into the Degree program.

If the applicant is accepted, our church, denomination, or fellowship of churches _____
_____ is committed to upholding _____ as
(Name of Applicant)

he/he pursues the Bachelor of Theology degree, Associate of Theology degree or Diploma of Theology at the Evangelical Theological College.

We agree with the applicant's decision to pursue this degree or diploma and we commit ourselves to stand beside him or her as he/she pursues his/her studies.

Specifically, we understand that the applicant will be expected to be involved in ministry experience during his/her time of study. Therefore,

- we agree to provide the applicant with a **ministry** throughout his/her time of study.
- we agree to provide a **Ministry Supervisor** throughout his/her time of study.
- we agree to have the Ministry Supervisor **file regular reports** on the student's ministry performance.

The name of the Ministry Supervisor for this applicant is _____.

The Ministry Supervisor should:

- be available, experienced, knowledgeable of the ministry area, and
- have sufficient authority to counsel/critique the student.

Name of person signing for the church _____

Position in the church _____

Signature _____

Date _____

Church Stamp _____