TRINITY THEOLOGICAL COLLEGE
490 Upper Bukit Timah Road, Singapore 678093
Tel: 65-67676677 Fax: 65-67676477
Email: registrar@ttc.edu.sg

SUPPORTING DOCUMENTS
Strictly Confidential

APPLICATION FOR ADMISSION

NAME of APPLICANT: _____ Programme: _____

For MTh / DTh applicant, please indicate your area of concentration (OT, NT, Theology, Church History, Pastoral Theology): _____

Please check (√) for supporting document(s) enclosed for submission.

check √	Items	Office Use
☐	**For Singaporean / Singapore PR applicants**: a photocopy of your NRIC. **For overseas applicants**: a photocopy of the first 2 pages of your passport, and a photocopy of your Identification Card.	
☐	A recent MEDICAL EXAMINATION by a qualified medical doctor (use TTC form)	
☐	A certified true copy* of Baptism Certificate. If this is unavailable, please request your current pastor to write a letter to certify that you have been baptized and/or confirmed.	
☐	A certified true copy of GCE 'A' Level **Transcript** or Diploma **Transcript**, and a certified true copy of **Certificate**.	
☐	**For MDiv/MTS and Advanced Degree applicants:** (1) An official **Transcript** to be sent directly by your institution to the Registrar's Office, Trinity Theological College, and (2) a certified true copy* of the **Certificate** of your highest education of your previous School(s) (i.e. College, University and Theological Seminary).	
☐	**English Proficiency** for English programme applicants whose medium of instruction in school **is not in English**. (Mark "X" under check if you do not need to submit.)	
☐	Write in your own words (300/400 words) your purpose in applying to Trinity Theological College and your expectation upon completion of the degree.	
☐	**For Basic programme applicants:** Write a personal testimony of (1) how you became a Christian (400 to 500 words) and (2) how you believe that you have been called by God into the Christian ministry (400 to 500 words).	
☐	**MTh, MLitt and DTh applicants:** Submit a sample of prior academic work in previous theological studies. If unable to produce any prior work sample, you may submit a brief writeup, of your intended area of concentration, giving the rationale in 300/400 words.	
☐	**MLitt and DTh applicants:** Submit a Provisional Research Proposal. **State in 300/400 words why you have chosen the particular area of concentration.**	
☐	**For BD/MDIV applicants:** A letter of endorsement from the church or denomination's ministerial /ordination committee. **For MTS/DipTS applicants:** A letter of recommendation/acknowledgement from the church pastor/minister. **For Advanced degree applicants:** A letter of endorsement from the church or denomination's ministerial /ordination committee, or if you are a faculty-in-development, a letter of endorsement from the principal of your sending theological institution.	
☐	2 referral forms to be sent to registrar@ttc.edu.sg directly. (Pages 7 – 14)	
☐	TTC Form on Finance	
☐	A non-refundable application fee of S$30.00 (or US$26.00) [inclusive of GST]. Bank details: 1) DBS account 033-017261-3 (Bank Swift Code: DBSSSGSG), 2) PayNow (UEN: T01CC1488C) indicating the purpose of payment Late application fee is S$60.00 (or US$52.00) [inclusive of GST].	

*Certified True Copy: Official Stamp of a recognised and creditable organisation/church with authorised person's signature.

Two Referee Forms (see pages 7 to 10) to be filled out by two referees and sent by them directly to the Registrar's Office by post or by email to registrar@ttc.edu.sg:

1) **A pastor or leader of your church who has known you for at least 3 years.**

   Name of Referee: _____

   Church: _____

2) **For Basic programme applicant:** a Christian other than family members or relatives who has known you for at least 3 years.
   For Advanced degree applicant: the principal or a lecturer/professor of the institution in which you completed your theological degree.

   Name of Referee: _____

   Church/Institution: _____

I, _____ certify that all the information provided in the APPLICATION FORM FOR ADMISSION and supporting documents are true and accurate.

Applicant's Signature: _____ Date: _____

Please send this application cover page TOGETHER with all the supporting documents (except for University/Seminary transcript, Referee Forms and Language Proficiency Result) and payment to:

The Registrar's Office
Trinity Theological College
490 Upper Bukit Timah Road
Singapore 678093

Please note:

1. ***The new academic year commences in the first week of July.***
2. ***International students are expected to arrive one week earlier to process their Student Pass.***
3. ***For Basic Programme: Request for transfer of credits will only be processed by the Registrar's Office upon acceptance into the programme applied and during the Registration session at Orientation. There is no automatic transfer of credits.***

Online Application and Supporting documents must reach the College no later than 31 January of the year the applicant wishes to enroll; and for residents in Singapore applying for Basic Programme, the due date is 28 February.

Interview will be conducted in Feb/Mar for international BD/MDiv applicants; and in Mar/Apr for local applicants.

Applicants will be informed by the end of April of the outcome of their application via email.

Applicant may write to registrar@ttc.edu.sg if you have any enquiry.

THIS APPLICATION WILL BE PROCESSED ONLY AFTER AN ONLINE APPLICATION HAS BEEN SUBMITTED AND ALL THE REQUIRED SUPPORTING DOCUMENTS HAVE BEEN RECEIVED.

CONFIDENTIALITY POLICY: All information provided by the applicant will be confidential and used solely for the purposes of application for admission and College's records.

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MEDICAL EXAMINATION

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Name _____ (underline surname or family name)

Date of Birth(dd/mm/yy)_____ Height _____m Weight _____kg

Address _____

1. Medical History (mental/psychological problem, serious illness & infections, operations, hospitalisations):

   _____

   _____

2. General Examination:

   Eyes _____ENT_____

   Skin _____Lymph nodes_____

   Breasts (female students) _____

   Cardio-respiratory system: BP_____Pulse rate_____

   Heart _____Lungs_____

   Peripheral pulses _____

   Abdomen _____

   Nervous system_____

3. Investigations:

   CXR report:_____

   Urine Labstix: Glucose _____Protein_____Blood_____Others_____

   UFEME (when indicated)_____

   Blood Hemoglobin_____

   Hbs Antigen _____Hb Antibodies _____

   VDRL & HIV (when indicated) _____

4. General remarks _____

   _____

I certify that _____ has been examined by me and has no significant physical or mental illness that will adversely affect his/her studies.

Name of Examining Doctor (IN BLOCK LETTERS): _____

Signature: _____ **Clinic's Stamp & Address:** _____

Date _____ **Telephone Number:** _____

Statement of Financial Support

In order to be admitted into the College's program, overseas applicants are required to submit official documentation certifying they are financially able to cover all expenses while attending the study program, including all tuition, personal, medical and living costs.

If applicants cannot afford their own study expenses and are, instead, being sponsored by a family member, organisation or school, applicants are required to submit the letter from their sponsor along with all official documentation. The letter must bear the sponsor's original signature.

Upon acceptance into the College, new international students are required to pay one year of fees in advance. In the event that a student withdraws from the programme, the College will refund the fees paid in advance, provided the student notifies the College in writing before or not later than 14 days from the start of the new semester.

Registrar's Office
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STATEMENT OF FINANCIAL SUPPORT

Name of Student: _____

Course of Study : _____ **Period of Study :** _____

☐ I am a **self-supported** student. I declare that I have sufficient financial resources to support the full course of study at TTC. I understand that should I be found by the College to be financially unable to finance my studies at any point, the College will have the discretion to terminate or defer my studies.

☐ I have applied for scholarship : *(Name of Scholarship)* _____.
Status : ☐ approved ☐ pending approval

☐ I confirm that *(Name of Sponsor)* _____ has agreed to support the cost of my studies at TTC.

Section to be completed by Sponsor : (* delete where applicable)

I, * the sponsor / on behalf of the sponsoring organisation, agree to commit financially to support the above-mentioned student.

I /we understand that we will be financially liable to pay the College any outstanding invoices related to the student sponsored.

The sponsorship will cover the following expenses (please ☑) **:**

☐ **Tuition and other College Fees**
* Full course of study / restricted to _____ years / _____ semesters

Accommodation and Living Expenses
☐ - For Student only
☐ - For Student and Family

Allowances
☐ - Book Allowance
☐ - Pocket Money
☐ - Others : (*pls indicate)* _____

International Student's Expenses
☐ - Student Pass and Visa related expenses
☐ - Immigration Deposit *(refundable upon cancellation of student pass and return to home country)*
☐ - Others : (*pls indicate)* _____

Signature of Sponsor / Authorised Signatory : _____

Name of Sponsor / Authorised Signatory : _____

Position of Authorised Signatory : _____

For and on behalf of : _____
(please affix organisation's stamp)

Date : _____

BILLING INSTRUCTIONS

Name of Student: _____

Course of Study : _____ **Period of Study :** _____

☐ I am a **self-supported** student. Please send the College invoice to me.

***** Section to be completed by sponsor, if student receives external funding:***

☐ The sponsorship fund will be paid to the student directly. The student will be responsible for the payment of fees to the College.

☐ The sponsor will pay the College directly for the items indicated below. Other support, if applicable, will be given to the student directly. Please **email** the College bill to the following person:

Name : _____

Email Address : _____

Contact Number : _____

For any clarifications, please contact :

Name of Person : _____

Email : _____

Please send an invoice for the following items :(please ☑)

☐ **Tuition and other College Fees**

Accommodation and Living Expenses *(on TTC Campus)***:**

☐ **For Student only**

☐ On Campus Accommodation and Meals (During Term Time Mon-Fri excluding public holidays and term breaks)

- **Meal Allowance** paid to student during College vacation when meals are not provided : S$105/week
  - ☐ <Mid-Term Break> Meal Allowance – 5 weeks per year
  - ☐ <End of Semester Vacation> Meal Allowance - 14 weeks per year

☐ **For Student and Family**

☐ Accommodation on TTC campus (meals not included)

☐ Family Living Allowance *(amount is in accordance to College's guidelines [rev Jan 2022])*

☐ Couple S$900/mth ☐ Couple + 1 child S$1,100/mth ☐ Couple + 2 children S$1,300/mth ☐ Couple + 3 children S$1,500/month

☐ Education Allowance for Student's children (S$ _____ / mth – please indicate)

Other Recommended Allowances *(amount is in accordance to College's guidelines)*

** To be completed only if you plan for the College to administer the payment of allowances to the student

☐ **Book Allowance** (per semester)

☐ $550 – DTh / MTh ☐ S$450 – BD / MDiv / MTS ☐ S$450 – MMin

☐ **Pocket Money** : S$_____ per month *(please indicate amount)*
(S$400 for students who stay on college campus; S$500- S$700 for students who stays out of college campus)

International Student's Expenses

☐ Student Pass and Visa related expenses

☐ Immigration Deposit *(refundable upon cancellation of student pass and return to home country)*

☐ Others (*pls indicate amount)* _____

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REFEREE FORM – BASIC PROGRAMME

CONFIDENTIALITY POLICY
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Name of applicant: _____

Name of referee: _____ Position or title: _____

Church/Organisation: _____

Address: _____

_____

Tel: _____ Email: _____

ACADEMIC & GENERAL

I) How long, how well and under what circumstances have you known the applicant?

_____

_____

II) Please give an estimate of the applicant's qualifications for theological study with particular reference to:

		Excellent	Good	Average	Inadequate	Unable To Report
1.	Intellectual Qualities					
	a) Comprehension	☐	☐	☐	☐	☐
	b) Creative Ability	☐	☐	☐	☐	☐
	c) Research Interest	☐	☐	☐	☐	☐
	d) Reflective Ability	☐	☐	☐	☐	☐
	e) Independence	☐	☐	☐	☐	☐
2.	Language Proficiency	☐	☐	☐	☐	☐
	a) Ability to express orally	☐	☐	☐	☐	☐
	b) Ability to express in writing	☐	☐	☐	☐	☐

III) Does the applicant give a definite witness to Christian conversion?

_____

_____

IV) Please comment on the applicant's sense of calling to Christian ministry.

_____

_____

V) How well is the applicant motivated to pursue theological studies?

_____

_____

VI) What has been the applicant's record as a participating church member?

_____

_____

VII) How do you recommend the applicant to Trinity Theological College?

Please circle the response that best describes your feelings and share your reasons for that response:

Enthusiastically	**Strongly**	**Fairly Strong**	**With Reservation**
☐	☐	☐	☐

Comment:

_____

_____

_____

_____

_____

_____

_____

_____

PERSONALITY & CHARACTER EVALUATION

A) Please rate the applicant with respect to each of the characteristics listed below by marking (X) the item under each heading which most nearly represents your evaluation. In the space to the right, describe (briefly and concretely) specific instances that support or interpret your judgment. If you feel you have inadequate information to form a fair judgment on a particular quality, please leave it blank.

		Comments
Personal Appearance & Manner ☐ Careless ☐ Fair	☐ Presentable ☐ Good	
Poise ☐ Lacking in confidence ☐ Exhibits little self-confidence	☐ Moderately self-confident ☐ Self-confident	
Emotional Stability (consider how the applicant reacts in stress situation) ☐ Unstable ☐ Fairly well-balanced	☐ Well balanced ☐ Unusually balanced	
Social Acceptance (How does the applicant's personality affect others) ☐ Tolerated ☐ Accepted	☐ Well-liked ☐ Sought after	
Relationship with Parents ☐ Strained ☐ Distant	☐ Faily close ☐ Warm	
Relationship with Spouse (if married) ☐ Strained ☐ Fairly warm	☐ Warm ☐ Intimate	
Punctuality ☐ Never punctual ☐ Fairly punctual	☐ Usually punctual ☐ Always punctual	
Responsibility ☐ Unable to assume responsibility ☐ Fairly responsible	☐ Some initiative ☐ Very responsible	
Team work ☐ Works best alone ☐ Works fairly-well with others	☐ Works well with others ☐ Sought after team member	
Humility ☐ Lacking in humility ☐ Fair	☐ Growing ☐ Genuine & contagious	
Compassion ☐ Lacking in humility ☐ Fair	☐ Growing ☐ Genuine & contagious	
Leadership ☐ Makes no attempt to lead ☐ Has some promise	☐ Good ability ☐ Unusual ability	
Acceptance of leadership ☐ Works against superiors ☐ Uncooperative	☐ Usually cooperative ☐ Strongly supportive of superiors	

B) Listed below are some of the tendencies which, if present, may reduce the effectiveness of the applicant's work and witness. If you have noted any of the following or similar limitations in the candidate, please underscore and describe (in the space below) the form and intensity of such behavior.

Impatient, intolerant, argumentative, domineering, sullen, "cocky" or critical of others.
Easily embarrassed, offended, discouraged, depressed, or irritated.
Frequently worried, anxious, nervous, or tense.
Prejudiced toward groups, races, or nationalities.
Given to exclusive and absorbing friendships.
Lacking in humor, or in the ability to take a joke.

_____

_____

_____

If the applicant seems relatively free from all such tendencies, check here. ☐

C) Has the applicant been subject to any undue physical or mental strain? If so, how did he/she cope?

_____

_____

D) If possible, list other persons qualified to give a sound appraisal of the applicant:

		Name	Address or Email	Connection with the applicant
1.	1.			
2.	2.			
3.	3.			

Signature of Referee: _____ Date: _____

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	d) Reflective Ability	☐	☐	☐	☐	☐
	e) Independence	☐	☐	☐	☐	☐
2.	Language Proficiency	☐	☐	☐	☐	☐
	a) Ability to express orally	☐	☐	☐	☐	☐
	b) Ability to express in writing	☐	☐	☐	☐	☐

III) Does the applicant give a definite witness to Christian conversion?

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Enthusiastically	**Strongly**	**Fairly Strong**	**With Reservation**
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Comment:

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_____

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Signature of Referee: _____ Date: _____