#### **BACHELOR OF DIVINITY (B.D.)**

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

- 1) Candidates with Bachelor Degree (B.A., B.Sc., B.Com., B.E. etc. 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 B.Th. of Senate of Serampore College with 'B' grade or other 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.

Kindly pay Rs. 500/- for B.D. Application Registration Fee by any of the following payment method.

- a) Online fund transfer via NEFT/ RTGS / Internet Banking / Mobile banking / IMPS to UNITED THEOLOGICAL COLLEGE, SAVING BANK ACCOUNT, A/C NO. 0429101003275 with Canara Bank, Benson Town Branch, IFSC Code: CNRB0000429.
- b) UPI payment id: 492082003275@cnrb
- c) Money Order/ Demand Draft/ Cheque drawn in favour of "United Theological College, Bangalore"

Kindly send the relevant transaction copy to <a href="mailto:acc.unitedtc@gmail.com">acc.unitedtc@gmail.com</a> and attach it to the application form.

Last date to receive the filled in BD Application Form: **November 15, 2024** with **Application Registration fee of Rs. 500/-**

Last date to receive the filled in BD Application Form: November 22, 2024 with late fee of Rs. 900/- (Rs. 500/- + Rs. 400/- late fee)

With all good wishes,

Yours sincerely,

#### I. John Rogin Jacob

Registrar

# THE UNITED THEOLOGICAL COLLEGE, BANGALORE- 560 006 DIVISION OF GRADUATE STUDIES



#### Application Form for Bachelor of Divinity (B.D.) Admission

Photo

NOTE: USE BLOCK LETTERS
1. Name of Applicant in full:
2. Name of the Parent/ Guardian:
Occupation of the Parent/ Guardian:
3. Permanent Address:
Pin Code:
Telephone No Mobile No
Email ID (in BLOCK LETTERS):
4. Present Address:
Pr. C. I
Pin Code:
5. Date of Birth:
6. Marital Status: Married Single
If single, whether planning to get married during study period? When?
If married, date of marriage:

7. Academic qualifications: (List in the order of passing the examination and Attach attested copies of all certificates)

Degree	College	University	Medium of Education	Class	

8. Mot	8. Mother Tongue:								
9. <b>Oth</b>	er Languages	s studied and th	ne number of years of each	ı <b>:</b>					
		Language	Numbers of Years stu	ıdied					
10. <b>Ind</b>	licate past an	nd present work	experience with data:						
	a) Church:	• • • • • • • • • • • • • • • • • • • •							
	b) Secular:	•••••		•••••	•••••				
11. Church (Denomination) of which you are a member:									
•••••	•••••••••••••••••••••••••••••••••••••••								
	_		r indicating the status of you						
13. a. Are you a sponsored candidate of your Church?									

b. If so, give the name and address of your Church Head (Enclose a letter from your Church Head sponsoring your candidature)

c. Is your Church a member of UTC Society?
14. a. Are you a sponsored candidate of an Agency such as: College/Institution/Organization?
b. If so, give the name and address of your Agency responsible for your candidature (Enclose a letter from such authority sponsoring your candidature)
15. Are you an independent candidate?
16. <b>Person(s) responsible for your financial support while in the College</b> :(Enclose a letter from the Church Head/Head of the Institution/others who would ensure responsibility for your financial support throughout your studies)
<ul> <li>17. Names and addresses of four persons who can supply confidential information about you. (The Personal Reference Forms are enclosed at the end of the Application Form) These persons shall be: a. Church Head who is authorized to speak on behalf of the Church/Agency to which you belong: </li> </ul>
b. Your Pastor / Presbyter / Chaplain:
c. A lay person responsible in your Church:
d. A teacher under whom you studied in College:
18. Contact details of parents for dealing with emergency matters:  a) Father`s/ Mother`s Name:
Phone No.:
Email ID:
Signature of the Father:

a) Name of Family Member:
Relationship with student:
Phone No.:
Email ID:
b) Name of a Pastor:
Church:
Phone No.:
Email ID:
20. Give a brief <b>auto-biographical statement</b> on a separate sheet of paper with special reference to those influence significant for your decision to pursue theological education.
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

19. Contact details of two persons (a Family member and a Pastor) who accompany the student

in theological formation at UTC (Kindly attach their consent letter separately)

#### FOR THE APPLICANTS WHO ARE MARRIED

(to be filled by all married applicants)

21. Husband/Wife's Name:	•••••		•••••	
(Family Photo and Photocopy of Mar	riage Certificate	e to be enclos	sed)	
22. Is he/she employed? If so, the nature emoluments:	_			
23. <b>Is he/she intending to do theologica</b> (e.g. CCS/DCS/Diploma in Counselling Counselling or B.D. should send in the	g, B.D. etc.) Pe eir applications	ersons intendal	ing to do Diploma	ı in
24. Highest examination he/she has pas	ssed: (Give Plac	ce and Year):		•
	•••••	••••••	•••••	••••
25. Number and ages of Children Name		Age	Class	
1				
2				
3				
4				
5	• • • • • • • • • • • • • • • • • • • •	•••••	•••••	
(Enclose Aadhar Ca	rd copy of eacl	n family mer	nber)	
26. Are you planning to reside with you studies?	ır family in the	e campus du	ring your course	of
27. Would you be able to join if family (We have only limited number of family)	_		?	
Date:		Signature	of the Applicant	t
~~····		Signatur	or the rapplicant	•

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

**FAMILY HISTORY:** Mention the kind of medical History.....

- 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. Sisters / Brothers
- 4. Wife / Husband

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

Cancer	Inability to Concentrate
Major accidents	Substance Abuse
stroke	HIV/AIDS
Alzheimer's disease	Mental Health
Pneumonia	Hernia
kidney disease	Shortness of Breath
suicide ideation	High B.P.
cancer	Diabetes
Major accidents	Stomach Trouble
stroke	Eye Problem
Alzheimer's disease	Backache
Pneumonia	Easy Fatigue
Typhoid	Piles
Jaundice	Heart Trouble
Malaria	Asthma
Dysentery	Appendicitis
Diphtheria	Skin disease
Chicken Pox	Discharging Ears
Mumps	Deafness
Filariasis	Depression
Joint Pains	Lack of Confidence
Rheumatic Fever	Dizziness
Recent loss / gain in weight	Nervous Breakdown
Pleurisy	Sleeplessness
T.B.	Fainting Spells
Tonsillitis	Fits
Overweight and Obesity	Any Deformities

#### FOR WOMEN ONLY

1. Pregnancies

- 2. Any gynecologist treatment
- 3. Any Operation or Injuries

#### Brief about 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

#### DOCUMENTS THAT MUST BE INCLUDED WITH THE APPLICATION FORM

No application will be considered unless the following documents are enclosed

۱.	B.D. Application Form Registration Fee Rs. 500/- to be paid either through online fund
	transfer via NEFT/ RTGS/ IMPS/ Internet Banking/ Mobile banking to UNITED
	THEOLOGICAL COLLEGE, SAVING BANK ACCOUNT, A/C NO.
	$0429101003275\ with\ Canara\ Bank, Benson\ Town\ Branch, IFSC\ Code:\ CNRB0000429$
	(or) UPI payment id: 492082003275@cnrb (or) Money Order/ Demand Draft/ Cheque
	drawn in favour of "UNITED THEOLOGICAL COLLEGE, BANGALORE". Kindly
	send the relevant transaction copy to <a href="mailto:acc.unitedtc@gmail.com">acc.unitedtc@gmail.com</a> and attach it to the
	application form.
2.	Attested copies of Transcript of Record and the University Degree Certificate
3.	☐ A letter from your Pastor or Presbyter indicating the status of your Church membership
1.	A letter from your Head of the Church/Agency indicating that you are a sponsored candidate. (For sponsored candidates only)
5.	Non-Financial Sponsored candidate must submit letter from those who guaranteeing financial support in Rs. 20/- Non - Judicial Stamp paper.
5.	Consent Letter from a Family member and a Presbyter who accompany the student in theological formation at UTC.
7.	Health Report (From a Medical Practitioner)
3.	Autobiographical statement
€.	Two passport size photographs
10.	. Applicants who are married must attach their family photo and Aadhar Card/ Birth certificate (only for kids who doesn`t have Aadhar) of their family members.

The filled-in form along with the required documents, should be sent to:

The Registrar,
The United Theological College,
63 Miller's Road, Benson Town, J.C. Nagar Post,
Bangalore - 560 006.
Registrar's Mob. No.: +91 94876 59310
Office.: +91 96112 70124

E-mail: registrarutc@gmail.com Website: www.utc.edu.in

#### PHYSICIAN'S EXAMINATION

		11110101			<b>J</b> 1			
ENT	Height	Weigh	t	Genera	al Appe	l Appearance		
<b>L</b> IN I	EYES Visual acuity PUPILS Eyes Lids Glands Skin Rash		Distant Vision Hearing Cervical Scars		on Near Vision  Nose & Throat			
	Axillary		Inguina	al				
Circu	latory System	B.P.		Pulse Peripheral Pul Varicose veins				
ORTI	HOPAEDIC			Posture Spine Hand & Feet	Gait			
RESP	IRATORY IN	NSPECTION		114110 00 1 000				
	Abdo	men		Lungs Liver Spleen Hernia		Teeth and Gums		
NERV	OUS SYSTE	M		Higher Functi Speech Motor Reflexes	on			
	Any o	other abnormalit	у	Kellexes				
EMO'	<b>FIONAL STA</b> Evide	ABILITY nce of psychiatr	ric disor	ders				
LABC	DRATORY EX	XAMINATION	1					
		%WMCT . w Fever	Urine P	L M	E	В		
Blood	Group							
CHES	T X-RAY							
Summ	ary of current	findings:						
						ondition which would of study.		
Physic	ian's Name &	Signature		• • • • • • • • • • • • • • • • • • • •				

# THE UNITED THEOLOGICAL COLLEGE: BANGALORE CHURCH SPONSORSHIP FORM

This is to certify that Mr./Mrs./Miss:
from members of
sponsored by our Church/Institution for BD Studies at the United Theological College
Bangalore. By Sponsorship we mean (Please indicate one of the following statement
by ticking in)
NAME OF CHURCH/INSTITUTION:
DATE:

# THE UNITED THEOLOGICAL COLLEGE, BANGALORE PERSONAL REFERENCE FORM FOR B.D. APPLICANTS

18 a.	a. Church Head who is authorized to speak on behalf of the Church/Agency to which you belong:									
STUD	ENT'S NAME:	•••••	• • • • • • • • •	• • • • • • • •	• • • • • • • • •		•••••	• • • • •		
	ollege will appred above who has a	•	•	eting this	s referenc	ce form	on behal	f of	the person	
apprai	remember that the sal of his/her quant									
1. H	1. How long and under what circumstances have you known the applicant?									
	re you familiar rogramme?	with the United								
3. D	o you feel this ap	oplicant should u								
4. H	ow would you spaces).	rate the applica	nt's pro	ficiency	in Eng	lish? (•	Tick th	he a	appropriate	
		EXCELLENT		GOOD	<u>)</u>	<b>FAIR</b>	<u>]</u>	PO	<u>OR</u>	
Spe	eaking				••••		••••			
Rea	ading							•••••		
Wr	iting									
5. P	lease Indicate you	ur judgement of	the appli <b>Above</b>	-	ticking th	e appro	priate spa Below	aces	s below:	
		Excellent			Average	<u>e</u>	Average	<u>e</u>	Opinion	
	demic ability nments:			<b></b>				•		
	ial awareness concern/ Comme	ents:						•		
	dership ability nments:		•••••	••				•		
	enness to new as/ Comments:		••••••	••	•••••			•		
Con	otional maturity nments:							•		
f) Will	lingness to work			••						

hard/ Comments					
g) Ability to adjust new Situation/ Comments					
h) Ability to get along with other people/ Comments:					
i) Sense of Christian Commitment/ Commo	ents:				
6. Recognising that ever limitations that the ap the College may help	plicant has which				
7. What is your estimate	• •		`		
•	• •	rself from person	nai and rainily is	esource:	
b) Would need par	• •				
c) Would need ful	l support from o	ther sources:			
In the light of what y qualifications for admis				u rate his/l	ner personal
Not Endorsed	Endorsed With	<u>Hesitance</u>	Endorsed W	ithout Reser	<u>vation</u>
Date:		Signatu	ıre:		
NAME & DESIGNA	ATION of the p	erson recomme	ending the B.D	. applicant:	:
ADDRESS:					
Relationship to the Ap	plicant				
Please return this confid	dential report dir	ectly to:			

### THE UNITED THEOLOGICAL COLLEGE, BANGALORE PERSONAL REFERENCE FORM FOR B.D. APPLICANTS

18 b. Your Pastor, I	Presbyter or Cha	aplaın:			
STUDENT'S NAME:	•••••		•••••	••••••	•••••
The College will apprenamed above who has a			s reference form	on behalf o	of the person
Please remember that the appraisal of his/her quastrict confidence.		* *	•	•	•
1. How long and un		·			
2. Are you familiar programme?	with the United	Theological C	ollege, its purp	ose and its	educational
3. Do you feel this ap	oplicant should u	ndertake the abo	ove theological s	tudies? Com	nment:
4. How would you	rate the applica	nt's proficiency	in English? (	✓ Tick the	appropriate
spaces).	EXCELLENT	GOOD	) FAIR	PC	OOR
•	EXCELLENT	GOOD	_		<u>OOR</u>
Speaking	EXCELLENT	<u>GOOL</u>	<u>FAIR</u>		<u>OOR</u>
•		<u>GOOL</u> 			
Speaking					
Speaking Reading				  opriate space	es below:
Speaking Reading Writing			ticking the appro		
Speaking Reading Writing	ur judgement of t	he applicant by Above		opriate space Below	es below:
Speaking Reading Writing 5. Please Indicate you	ur judgement of t	the applicant by Above Average	ticking the appro	opriate space Below	es below: <u>No</u> <u>Opinion</u>
Speaking Reading Writing 5. Please Indicate you a) Academic ability Comments: b) Social awareness	ur judgement of t  Excellent	the applicant by Above Average	ticking the appro	opriate space Below Average	es below:  No Opinion
Speaking Reading Writing  5. Please Indicate you  a) Academic ability Comments: b) Social awareness and concern/ Comme	ur judgement of t  Excellentents:	the applicant by Above Average	ticking the appro	opriate space Below Average	es below:  No Opinion

Comments:

f) Willingness to work hard/ Comments					
g) Ability to adjust new Situation/ Comments					
h) Ability to get along with other people/ Comments:					
i) Sense of Christian Commitment/ Comme	ents:				
6. Recognising that ever limitations that the ap the College may help	plicant has whic				
7. What is your estimate d) Fully able to su	**	's financial back		•	
	tial support fron	-	·		
_	l support from o				
In the light of what y qualifications for admis				u rate his/h	er personal
Not Endorsed	Endorsed With	<u>Hesitance</u>	Endorsed Wi	thout Reser	<u>vation</u>
Date:		Signatu	re:		
NAME & DESIGNA	TION of the p	erson recomme	ending the B.D	. applicant:	
	• • • • • • • • • • • • • • • • • • • •			•••••	•••••
ADDRESS:					
				•••••	•••••
Relationship to the Ap	plicant				
Please return this confid	lential report dire	ectly to:			

# THE UNITED THEOLOGICAL COLLEGE, BANGALORE PERSONAL REFERENCE FORM FOR B.D. APPLICANTS

18 c. A lay person	responsible in	your Church:					
STUDENT'S NAME:	••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		•••••		
The College will apprenamed above who has a			his reference fo	rm on behalf o	of the person		
Please remember that the appraisal of his/her quastrict confidence.							
1. How long and under what circumstances have you known the applicant?							
2. Are you familiar programme?	with the United	d Theological	College, its pu	irpose and its	educational		
3. Do you feel this ap	plicant should u	ndertake the a	bove theologica	l studies? Com	nment:		
4. How would you rate the applicant's proficiency in English? (✓ Tick the appropriate							
spaces).							
spaces).	EXCELLENT	GOO	<u>DD</u> <u>FAI</u>	R PO	<u>oor</u>		
spaces).  Speaking	EXCELLENT			_	<u>OOR</u>		
-							
Speaking							
Speaking Reading	ur judgement of	  the applicant b	y ticking the ap	propriate space	es below:		
Speaking Reading Writing	ur judgement of	  the applicant b		propriate space			
Speaking Reading Writing	ur judgement of	  the applicant b <b>Above</b>	  by ticking the ap	propriate space	es below:		
Speaking Reading Writing 5. Please Indicate you	ur judgement of Excellent	  the applicant b <b>Above</b>	  by ticking the ap	propriate space	es below:		
Speaking Reading Writing 5. Please Indicate you a) Academic ability Comments: b) Social awareness	ur judgement of Excellent	  the applicant b <b>Above</b>	  by ticking the ap	propriate space	es below:		
Speaking Reading Writing  5. Please Indicate you  a) Academic ability Comments: b) Social awareness and concern/ Comme	ur judgement of Excellent	  the applicant b <b>Above</b>	  by ticking the ap	propriate space	es below:		

Comments:

f) Willingness to work hard/ Comments				•••••	
g) Ability to adjust new Situation/ Comments					
h) Ability to get along with other people/ Comments:					
i) Sense of Christian Commitment/ Comme					
6. Recognising that ever limitations that the ap the College may help	plicant has whic				
7. What is your estimate	• •	·	`		
	•	rself from person	nal and family re	source:	
h) Would need par	• •				
i) Would need ful	l support from o	ther sources:			
In the light of what y qualifications for admis				u rate his/h	er personal
Not Endorsed	Endorsed With	<u>Hesitance</u>	Endorsed Wi	thout Reser	vation_
Date:		Signatu	re:		
NAME & DESIGNA	TION of the p	erson recomme	ending the B.D.	applicant:	
ADDRESS:					•••••
Relationship to the Ap	plicant				

Please return this confidential report directly to:

# THE UNITED THEOLOGICAL COLLEGE, BANGALORE PERSONAL REFERENCE FORM FOR B.D. APPLICANTS

18 d. A teacher und	der whom you	studied in Co	llege:		
STUDENT'S NAME:		• • • • • • • • • • • • • • • • • • • •	•••••	•••••	•••••
The College will appre			this reference for	rm on behalf o	of the person
Please remember that the appraisal of his/her quantitative strict confidence.			•	•	•
1. How long and und	ler what circums	stances have yo	ou known the app	olicant?	
2. Are you familiar programme?	with the Unite	d Theological	College, its pu	rpose and its	educational
3. Do you feel this ap	oplicant should i	undertake the a	bove theologica.	I studies? Con	iment:
4. How would you	rate the applic	ant's proficien	cy in English?	(✓ Tick the	appropriate
spaces).			_		
spaces).	EXCELLENT	<u>GO(</u>	<u>DD</u> <u>FAI</u>	<u>R</u> <u>P</u> C	<u>OOR</u>
spaces).  Speaking	EXCELLENT				OOR
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Speaking Reading		the applicant t			
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Speaking Reading Writing		the applicant t	by ticking the ap	propriate spac	es below:
Speaking Reading Writing 5. Please Indicate yo a) Academic ability	ur judgement of  Excellent	the applicant be Above Average	by ticking the ap	propriate spac  Below  Average	es below:  No Opinion
Speaking Reading Writing 5. Please Indicate yo a) Academic ability Comments: b) Social awareness	ur judgement of  Excellent	the applicant the Above Average	by ticking the ap	propriate spac  Below  Average	es below:  No Opinion
Speaking Reading Writing 5. Please Indicate you a) Academic ability Comments: b) Social awareness and concern/ Comme	ur judgement of  Excellent	the applicant the Above Average	by ticking the ap	propriate spac  Below  Average	es below: <u>No</u> <u>Opinion</u>

Comments:

	f) Willingness to work hard/ Comments					
	g) Ability to adjust new Situation/ Comments					
	h) Ability to get along with other people/ Comments:					
	i) Sense of Christian Commitment/ Commo	ents:				
5.	Recognising that ever limitations that the ap the College may help	pplicant has whi				
7.	. What is your estimate	of the applican	t's financial ba	ckground? (√ Tio	ck One).	
	j) Fully able to su	pport himself/h	erself from per	sonal and family	resource:	
	k) Would need pa	rtial support fro	m other source	s:		
	l) Would need ful	ll support from	other sources:			
	In the light of what y				ou rate his/l	her personal
	Not Endorsed	Endorsed With	n Hesitance	Endorsed V	Without Reser	<u>rvation</u>
	Date:		Sign	ature:		
	NAME & DESIGNA	ATION of the	person recom	mending the B.	D. applicant	:
	ADDRESS:					
	Relationship to the Ap	plicant				
	Please return this confid	dential report di	rectly to:			