MASTER OF THEOLOGY (M.Th.)

The branch of studies offered during the academic year 2025-2026

- 1. Old Testament
- 2. New Testament
- 3. History of Christianity
- 4. Religion (Hinduism)
- 5. Religions (Primal)

- 6. Christian Theology
- 7. Christian Ministry (Pastoral Counselling)
- 8. Missiology
- 9. Women's Studies

Kindly note the following:

Kindly pay Rs. 650/- towards M.Th. Application Form 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
- Money Order/ Demand Draft/ Cheque drawn in favour of "United Theological College, Bangalore"

Kindly send the relevant transaction copy to <u>acc.unitedtc@gmail.com</u> and attach it to the application form.

Last date to receive the filled in M.Th. Application Form: November 15, 2024 with Application form fee of Rs. 650/-

Last date to receive the filled in M.Th. Application Form: November 22, 2024 with late fee of Rs. 1,100/- (Rs. 650/- + Rs. 450 late fee) With all good wishes,

Yours sincerely,

I. John Rogin Jacob Registrar.

THE UNITED THEOLOGICAL COLLEGE, BANGALORE – 560 006 DIVISION OF MASTERS' STUDIES



APPLICATION FOR MASTER OF THEOLOGY (M.Th.) ADMISSION

	Photo
NOTE: USE BLOCK LETTERS	
1. Name:	
(as per the Serampore Degree Certificate):	
2. Father's/ Guardian`s Name:	
3. Mother`s Name:	
4. Occupation of the Parent / Guardian:	
5. Permanent Address:	
Mobile No	
Email ID (in BLOCK LETTERS):	
6. Present address:	

7. Date of Birth:

8. Marital Status: 🔲 Married 📃 Single

If Married Date of marriage:

(If single, whether planning to get married during study period? When?)

.....

9. Academic Qualifications (List in the order of passing the Examination)

Degree	College	University	Medium of Education	Class	Year of Passing

10. Mother Tongue:			
11. Other Languages/classical languages studied and the number of years of each:			
12. Proficiency in I	English: (Circle or	ne)	
Writing:	a) Good	b) Fair	c) Poor
Reading:	a) Good	b) Fair	c) Poor
Speaking:	a) Good	b) Fair	c) Poor
13. Indicate Past a experience with			
	,	••••••	
14. Church (Denor you are a mem			
(Enclose a letter	municant membe from your Pastor tatus of your mem	or Presbyter	

16. Name and address of your Pastor or Presbyter:
17. Ordained/Not Ordained
(If ordained, date of Ordination):
18. a. Are you a sponsored candidate of your Church/ Institution/ Organization?
b. If so, give the name and address of your Bishop, or similar authority responsible for your candidature; also enclose a letter from such authority sponsoring your candidature.
19. Are you an Independent candidate?
20. Person(s) responsible for your financial support while in the College: (Enclose a letter from the Church authorities or Financial Guarantee Letter in a Rs. 20/- Non-Judicial Stamp Paper from those who will assume responsibility for your financial support, attesting that fact along with postal address, mobile no. & Email id.)
21. 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. Bishop/President/Principal/Head of the Institution
under whom you are presently serving:
b. District Minister/ Area Chairman:
c. Teacher under whom you studied B.D.:

d. Teacher under whom you studied B.D.:

22. 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)

a) Name of Family Member:
	Relationship with student:
	Phone No.:
	Email ID:

b) Name of a Pastor:
	Church:
	Phone No.:
	Email ID:

- 23. Give a brief auto-biographical statement on a separate sheet of paper with special reference to those influence significant for your decision to pursue theological education.
- 24. List your publications, if any (use a separate sheet, if needed):

25.	a) b)	Overall percentage in BD studies% Average percentage in Cluster%
26.	Mention	your BD Thesis Title:
••••		
••••		

27. Branch or Field of Study offered at UTC as per Serampore Regulations:

Choice of Preference

Old Testament		
New Testament	1	
History of Christianity	2	
Religion (Hinduism)	3	
Religion (Primal)		
Christian Theology		
Missiology		
Christian Ministry (Pastoral Counsel	ling)	
Women's Studies		
b) Indicate applicant's field of interest or area of proposed research:		
	New Testament History of Christianity Religion (Hinduism) Religion (Primal) Christian Theology Missiology Christian Ministry (Pastoral Counsel Women's Studies	

.....

Date

Signature of the Applicant

FOR THE APPLICANTS WHO ARE MARRIED

28. Spouse's Name:		
29. Spouse's Age:		
31. Is Spouse intending to study If so, the nature of the cours		
32. Spouse's Proficiency	(a) Good	(b) Fair
in English (Circle one)	(c) Poor	(d) None
33. Highest examination passed	l (Give place and year	·):

.....

34. Number and ages of children:

	Name	Gender	Age	Class
1				
2				
3				
4				

35. Nature of financial source to support the family:

.....

36. Would you be able to join if family quarters are not available?

Date

Signature of the Applicant

DOCUMENTS THAT MUST BE INCLUDED WITH APPLICATION FORM

No application will be considered unless the following documents are enclosed: (Tick for the document which has been sent in the block)

1. Pay Rs. 650/- towards M.Th. Application Form Registration Fee by any of the following payment method.

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 (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 <u>acc.unitedtc@gmail.com</u> and attach it to the application form.

- 2. Attested copies of **Degree Certificate** and **Transcript of Record** (if taken from Serampore)
- 3. A letter from your Pastor or Presbyter indicating the status of your Church membership (See 15 above)
- 4. A letter from your Bishop/Church authority/Head of the Institution/ Organisation indicating that you are a sponsored candidate (for sponsored candidates only (See 18 above)
- 5. Non-Financial Sponsored candidate must submit letter from those guaranteeing financial support in Rs. 20/- Non Judicial Stamp paper. (See 20 above)
- 6. Consent Letter from a Family member and a Presbyter who accompany the student in theological formation at UTC.
- 7. Health Report.
- 8. Auto-biographical statement (See 23 above)
- 9. Transcript of record for the highest academic course completed, including theological courses (Branch wise), if any.
- 10. Attested certificate for all Biblical or other classical languages studied but not included in the Transcript of Record.
- 11. Letter from the Employer.
- 12. Two Extra Passport Size Photographs.
- 13. Self-attested photocopy of your Aadhar card.

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 Mobile: +91 94876 59310: Office.: +91 96112 70124 E-mail: <u>registrarutc@gmail.com</u>; Website: www.utc.edu.in

CHURCH SPONSORSHIP FORM

This is to certify that Mr./	Mrs./Miss/Rev:	from
1	members of	has been sponsored by
our Church/Institution for M	A.TH. Studies at (the United	Theological College, Bangalore.
By <u>Sponsorship</u> we mean:	(Please indicate one of the	following statements by ticking
\checkmark		

- 1. <u>We will support</u> the candidate financially during his/her studies for this Degree/Diploma, <u>Intend to employ</u> him/her upon the completion of his/her studies at U.T.C.

(Signature)

BISHOP/PRESIDENT/DIRECTOR NAME OF CHURCH/INSTITUTION

DATE:....

OFFICIAL SEAL:

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

Any Operation or Injuries

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.

Name and Signature of the candidate

Date:

PHYSICIAN'S EXAMINATION

	Height	Weight	G	eneral Ap	pearance
ENT	EYES PUPILS	Visual acuity	Distant V		Near Vision
	Eyes Lids Glands Skin Rash Axillary	C Se	learing bervical cars nguinal	Nose	e & Throat
Circu	latory System	B.P.	Pulse		
			Periphera Varicose		
ORTI	HOPAEDIC		Posture Spine Hand & J	Gait	
RESP	IRATORY I	NSPECTION			
	Abdo	men	Lungs Liver Spleen Hernia		Teeth and Gums
NERV	VOUS SYSTE	M	Higher F Speech Motor	unction	
	Any o	other abnormality	Reflexes		
EMO	TIONAL ST A Evide	BILITY ence of psychiatric	disorders		
LABO	Stool H.B.9	XAMINATION U %WMCT w Fever	lrine P L	M E	E B
Blood	Group				
CHES	T X-RAY				
Summ	nary of current	findings:			
FITNESS FOR STUDY Do you consider that the candidate has any physical condition which would seriously interfere with his/her carrying out a rigorous programme of study.					
Physic	cian's Name &	Signature			
Date:.		Post & Q	ualification	•••••	
Addre					
				•••••	

PERSONAL REFERENCE FORM FOR M.TH. APPLICANTS

a. Bishop/President/Principal/Head of Institution under whom you are presently serving:

STUDENT'S NAME:.....

The College will appreciate your help in completing this reference form on behalf of the person named above who has applied for Admission.

Please remember that the interests of the applicant and the College are best served by your honest appraisal of his/her qualifications. Do not hesitate to be frank. <u>This information will be held in strict confidence</u>.

1. How long and under what circumstances have you known the applicant?

.....

2. Are you familiar with the UTC, its purpose and its educational programme?

.....

3. Do you feel this applicant should undertake the above theological studies? Comment:

.....

4. How do you rate the applicant's proficiency in English? (Tick the appropriate spaces). **EXCELLENT GOOD FAIR POOR**

Speaking	 	
Reading	 	
Writing	 	

	<u>Excellent</u>	Above <u>Average</u>	<u>Average</u>	Below <u>Average</u>	No <u>Opinion</u>
a) Academic ability Comments:					
b) Social awareness and concern/ Com					
c) Leadership ability Comments:					

d) Openness to new ideas/ Comments:	 	
e) Emotional maturity 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/ Comments:	 	 •••••

- 6. Recognising that everyone has problems and limitations, are you aware of any problems or limitations that the applicant has which might hinder his/her future usefulness, or with which the College may help him/her?
- 7. What is your estimate of the applicant's financial background? ($\sqrt{\text{Tick One}}$).
 - a) Fully able to support himself/herself from personal and family resource:
 - b) Would need partial support from other sources:
 - c) Would need full support from other sources:

In the light of what you know about the applicant, how would you rate his/her personal qualifications for admission to this College? ($\sqrt{\text{Tick One}}$).

Not Endorsed	Endorsed With Hesitance	Endorsed Without Reservation

Date:		•••		•	••	•	•••	•	•
-------	--	-----	--	---	----	---	-----	---	---

Signature:

NAME & DESIGNATION of the person recommending the M.Th. applicant: ADDRESS:

.....

Relationship to Applicant.....

Please return this confidential report directly to:

THE REGISTRAR, THE UNITED THEOLOGICAL COLLEGE, 63 MILLER'S ROAD, BENSON TOWN, J.C. NAGAR POST, BANGALORE – 560 006. **** ****

PERSONAL REFERENCE FORM FOR M.TH. APPLICANTS

b. District Minister/Area Chairman:

STUDENT'S NAME:.....

The College will appreciate your help in completing this reference form on behalf of the person named above who has applied for Admission.

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.....

2. Are you familiar with the UTC, its purpose and its educational programme?

.....

3. Do you feel this applicant should undertake the above theological studies? Comment:

.....

4. How do you rate the applicant's proficiency in English? (Tick the appropriate spaces). **EXCELLENT GOOD FAIR POOR**

Speaking	 	
Reading	 	
Writing	 	

	<u>Excellent</u>	Above <u>Average</u>	<u>Average</u>	Below <u>Average</u>	No <u>Opinion</u>
a) Academic ability Comments:					
b) Social awareness and concern/ Com					
c) Leadership ability Comments:					
d) Openness to new ideas/ Comments:					
e) Emotional maturit	у	•••••	•••••	•••••	•••••

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/ Comments:	 	

- 6. Recognising that everyone has problems and limitations, are you aware of any problems or limitations that the applicant has which might hinder his/her future usefulness, or with which the College may help him/her?
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Not Endorsed	Endorsed With Hesitance	Endorsed Without Reservation

Date:	Signature:
-------	------------

NAME & DESIGNATION of the person recommending the M.Th. applicant:

ADDRESS:

Relationship to Applicant.....

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THE REGISTRAR, THE UNITED THEOLOGICAL COLLEGE, 63 MILLER'S ROAD, BENSON TOWN, J.C. NAGAR POST, BANGALORE – 560 006. **** ****

PERSONAL REFERENCE FORM FOR M.TH. APPLICANTS

c. Teacher under whom you studied B.D.

STUDENT'S NAME:....

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.....

2. Are you familiar with the UTC, its purpose and its educational programme?

.....

3. Do you feel this applicant should undertake the above theological studies? Comment:

.....

4. How do you rate the applicant's proficiency in English? (Tick the appropriate spaces). **EXCELLENT GOOD FAIR POOR**

Speaking	 	
Reading	 	
Writing	 	

	<u>Excellent</u>	Above <u>Average</u>	<u>Average</u>	Below <u>Average</u>	No <u>Opinion</u>
a) Academic ability Comments:					
b) Social awareness and concern/ Com					
c) Leadership ability Comments:					
d) Openness to new ideas/ Comments:					
e) Emotional maturit	у	•••••	•••••	•••••	•••••

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/ Comments:	 	

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 - a) Fully able to support himself/herself from personal and family resource:
 - b) Would need partial support from other sources:
 - c) Would need full support from other sources:

In the light of what you know about the applicant, how would you rate his/her personal qualifications for admission to this College? ($\sqrt{\text{Tick One}}$).

Not Endorsed	Endorsed With Hesitance	Endorsed Without Reservation

Date:	Signature:
-------	------------

NAME & DESIGNATION of the person recommending the M.Th. applicant:

ADDRESS:

Relationship to Applicant.....

Please return this confidential report directly to:

THE REGISTRAR, THE UNITED THEOLOGICAL COLLEGE, 63 MILLER'S ROAD, BENSON TOWN, J.C. NAGAR POST, BANGALORE – 560 006. **** **** ****

PERSONAL REFERENCE FORM FOR M.TH. APPLICANTS

d. Teacher under whom you studied B.D.

STUDENT'S NAME:....

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1. How long and under what circumstances have you known the applicant?

.....

2. Are you familiar with the UTC, its purpose and its educational programme?

.....

3. Do you feel this applicant should undertake the above theological studies? Comment:

.....

4. How do you rate the applicant's proficiency in English? (Tick the appropriate spaces).

	EXCELLENT	GOOD	FAIR	POOR
Speaking				
Reading				
Writing				

	<u>Excellent</u>	Above <u>Average</u>	<u>Average</u>	Below <u>Average</u>	No <u>Opinion</u>
a) Academic ability Comments:				•••••	
b) Social awareness and concern/ Com					
c) Leadership ability Comments:					
d) Openness to new ideas/ Comments:					

e) Emotional maturity 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/ Comments:	 	

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 - a) Fully able to support himself/herself from personal and family resource:
 - b) Would need partial support from other sources:
 - c) Would need full support from other sources:

In the light of what you know about the applicant, how would you rate his/her personal qualifications for admission to this College? ($\sqrt{\text{Tick One}}$).

Not Endorsed	Endorsed With Hesitance	Endorsed Without Reservation

Date:	Signatura
	Signature:
2 4.01	~- <u>-</u>

NAME & DESIGNATION of the person recommending the M.Th. applicant:

ADDRESS:

.....

Relationship to Applicant.....

Please return this confidential report directly to:

THE REGISTRAR, THE UNITED THEOLOGICAL COLLEGE, 63 MILLER'S ROAD, BENSON TOWN, J.C. NAGAR POST, BANGALORE – 560 006. **** ****