



LIFE THEOLOGICAL SEMINARY

Accredited by Asia Theological Association (ATA)

HIG-328, Kalinga Vihar, K-5, P.O-Patra Para

Bhubaneswar, Odisha 751019

Phone no +91-6370696246, +91-7205806556

Email: itsadmission2006@gmail.com, Website: lifetheo.com

Dear Applicant,

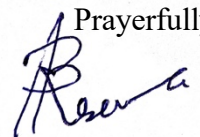
We are pleased to know of your desire to study at Life Theological Seminary. Our vision is to see God glorified in India through the transforming ministry of anointed and equipped servant-leaders. We are committed to help you as you consider applying to LTS. Please read the entire prospectus carefully and follow all the instructions while filling the application. Please return the completed application form to the admissions office with all the following documents attached before the due date.

GUIDELINES FOR FILLING UP THE APPLICATION

Kindly read the following guidelines carefully before filling up the application. Send your completed application to the above address by registered post along with the following documents.

1. A testimony of your Christian experience which will include the following:
 - a) Personal salvation experience with Christ.
 - b) Christian growth and commitment.
 - c) Your involvement in your Local Church.
 - d) Your personal views on the Christian responsibilities in the Church & Society.
2. The original certificates and mark sheets should be submitted during the time of admission.
3. Attach a set of Xerox Copies of all your Certificates and Mark sheets with the originals.
4. Medical fitness Certificate from a registered medical practitioner.
5. Statement of financial undertaking by your sponsor.
6. Letters of recommendation from the following:
 - a) Your Pastor
 - b) Elder/Deacon of your congregation.
 - c) Head of the institution if you worked in any institution.
7. Affix two passport size photographs and Aadhar card color copy.
8. Attach your baptism certificate.

Please ensure that you have provided all required information. Incomplete application will be rejected. The last date for receiving the completed application is 15th June 2025. After receiving the application, the Director of Admissions will intimate you for the entrance examination and Personal Interview. The entrance examination will be conducted on Biblical Knowledge, General Knowledge and English language proficiency followed by interview. Bring the intimation letter when you come for entrance examination. Your admission will be based on your performance in the Entrance Examination and the Personal Interview.

Prayerfully,


Director of Admission
Mobile No: +91-6370696246

LTS

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APPLICATION FOR ADMISSION

(Please complete the application with appropriate information. Incomplete application will be rejected. The Application Must be Filled in CAPITAL LETTERS Only)

I. Admission sought for (Please tick the appropriate program)

☐ Bachelor of Theology

☐ Diploma in Theology

☐ Master of Divinity

Passport Size Photograph

II. Personal information:

NAME

[illegible]

First Name

Middle Name

Last Name

Date of Birth:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| d | d | m | m | y | y | y | y |
|---|---|---|---|---|---|---|---|

Gender:

Male

Female

III. Address for Communication:

[illegible][illegible][illegible]

| | | | | | | |
|---------|--|--|--|--|--|--|
| PINCODE | | | | | | |
|---------|--|--|--|--|--|--|

[illegible]

| | | | | | | | | | |
|---------|--|--|--|--|--|--|--|--|--|
| COUNTRY | | | | | | | | | |
|---------|--|--|--|--|--|--|--|--|--|

[illegible][illegible][illegible]

Check one: ☐ Single ☐ Married ☐ Widowed/Separated/Divorced (Please include details in the Testimony)

If married, Spouse name: _____

Occupation of the Spouse:

Children (if any) Names and ages:

Highest Educational Qualification (Spouse): _____

Area of Interest (Spouse):

Father/Guardian:

Name: _____ Occupation: _____

Address: _____ City _____ State _____

Pincode _____ Country _____ Mobile No _____

During your studies at LTS how are you going to accommodate and provide for your family?

Present occupation: _____

IV. Academic Information:

List high school, colleges and universities in the order in which you attended. It is the applicant's responsibility to have all transcripts sent to the Admissions Office at LTS BBSR.

| Qualification | Name and Place of the College/University | Board | Year of completion | Class/Division | Percentage (%) |
|------------------------|--|-------|--------------------|----------------|----------------|
| 10 th / HSC | | | | | |
| +2 / 12 th | | | | | |
| +3 / Graduation | | | | | |
| Post-Graduation | | | | | |
| Any Other | | | | | |

V. Christian Life:

- a) Testimony of Christian Life Experience (Write in a separate paper & attach.)
- b) Testimony of your call for Ministry of the Gospel (Write in a separate paper & attach.)
- c) Date & nature of your Baptism (Baptism by Immersion/Sprinkling/Infant Baptism/Adult Baptism)
(Attach a copy of your Baptism Certificate or a Pastoral Statement of your Baptism with Church seal)
- d) Name of your Church Denomination: _____
- e) Name of your Pastor: _____
- f) Are you involved in Christian Ministry at present? Yes/ No If Yes, please give the details
- i) What is your Organization/ Institution/ Church? _____
- ii) What is your position and responsibility? _____
- iii) What is your ministerial experience? _____
- g) Specify the area of ministry you are interested in: _____

VI. Financial Information:

i) Financial Policies:

- a) You may check the website of LTS for their financial policies.
- b) You may write to the registrar for any possibilities of work scholarship.

ii) Financial Obligation:

- a) How will you meet your financial needs while studying in LTS?

☐ Self ☐ Church ☐ Parents ☐ Organization (Tick the appropriate)

- b) Please identify your sponsor and specify the Amount: _____

VII. Health Information:

- a) Do you have any physical disabilities? ☐ Yes ☐ No
If yes, please specify _____
- b) Do you suffer from any chronic disease? ☐ Yes ☐ No
If yes, please specify _____
- c) Do you have any medical concern now? ☐ Yes ☐ No
If yes, please specify _____
- d) Do you need any special diet? ☐ Yes ☐ No
If yes, please specify _____
- e) Are you allergic to any food/ medicine or any other thing? ☐ Yes ☐ No
If yes, please specify _____

VIII. Extracurricular Activities:

- a) Specify your talents/ hobbies: _____
- b) Are you interested in Music or Sports? _____
- c) Have you been involved in any social activities? specify _____
- d) Bring your certificates of achievements and awards _____

IX. Statement of personal declaration and commitment:

I hereby certify that, all information provided by me in this application form for admission in LTS is correct to the best of my knowledge. If admitted, I hereby promise to abide by the code of conduct as spelt out in the “Student Handbook” of Life Theological Seminary. Moreover, I promise to demonstrate the highest standard of Christian character and behavior as a follower of Christ while I pursue my Biblical and Theological studies at LTS. I shall submit to the rights of the LTS Administration to take any appropriate action, if, in their judgment, my behavior or character contrary to the spirit and emphasis of LTS.

Signature of the Applicant

Date: _____

Signature of the Registrar

Date: _____



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MEDICAL CERTIFICATE

Name _____ Sex _____ Age _____

Address _____

Height _____ Weight _____

HISTORY OF ANY PREVIOUS

ILLNESS / MEDICATION:

Jaundice _____

Tuberculosis _____

Congenital troubles _____

Rheumatic heart _____

Epilepsy _____

Respiratory problems _____

Long term treatment _____

Hypertension _____

Epilepsy _____

Sickle cell cycle _____

Fits _____

Operations _____

Asthma _____

Diabetes _____

Intolerance or allergy to any food _____

Kidney disease _____

Joint Pains _____

GENERAL PHYSICAL EXAMINATION:

ENT Examination _____

Eye _____

Cardio-vascular system _____

Central nervous system _____

Respiratory system _____

Abdominal examination _____

Blood Pressure _____

Skeletal _____

Skin disease _____

LABORATORY EXAMINATION:

Blood - Hb, TC, PC, ESR _____

Rh Pos/Neg _____

Serology _____

Stool - Occult blood _____

Hemoglobin _____

Urine - Micro _____

SUMMARY OF ABOVE EXAMINATIONS AND FITNESS REPORT:

I do hereby certify that, to the best of my knowledge the above candidate is physically fit to an intensive programmed of study.

Date: _____

(Doctor's Signature and Seal)



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REFERENCE FROM SENIOR CHURCH LEADER

(Church Senior Leader / Spiritual Mentor will fill this form personally)

Please answer the following questions prayerfully for the applicant who has applied to study in Life Theological Seminary. We will appreciate your unbiased appraisal that will help us to know the applicant's character, motive and his calling for the service of Jesus Christ and His gospel. Your evaluation will be strictly confidential.

Please return this form directly to LTS in the above-mentioned address by registered post.

1. Name of the Applicant: _____

2. Admission sought for: Dip. Th. ☐ B. Th. ☐ M. Div. ☐ (Tick the programs name)

3. Address: _____

4. How long have you known the applicant? _____ In what capacity? _____

5. Applicant's ability to get along with others? _____

6. Does the applicant have any health problems? ☐ Yes ☐ No

If yes, please explain briefly? _____

7. How long has the applicant been a member of your church? _____

8. Is the applicant related to you? ☐ Yes ☐ No If yes, in what relationship? _____

9. **How would you rate the applicant in the following areas:** (Please mark with ✓ in the appropriate column)

| | Not Observed | Poor | Average | Good | Very Good |
|-------------------------------|--------------|------|---------|------|-----------|
| Christian Commitment | | | | | |
| Spiritual Maturity | | | | | |
| Christian Character/Testimony | | | | | |
| Attitude to authority | | | | | |
| Integrity/Honesty | | | | | |
| Leadership ability | | | | | |
| Willingness to learn | | | | | |
| Relationship with the family | | | | | |
| Ability to study in English | | | | | |

6. Applicant's Ability to Finish an Assigned Task:

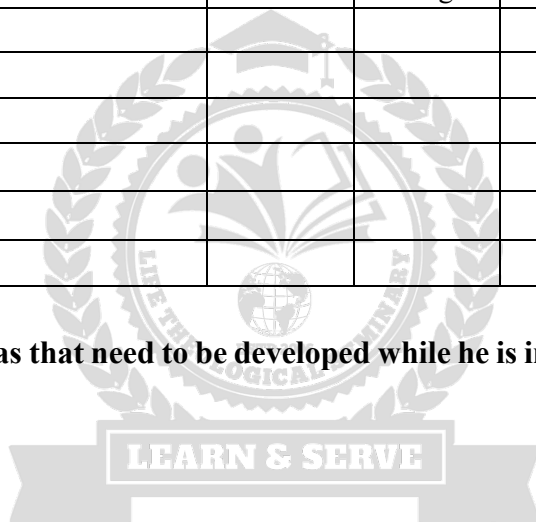
| | Not observed | Poor | Average | Good | Very Good |
|-----------------------|--------------|------|---------|------|-----------|
| Physical/ manual work | | | | | |
| Leadership task | | | | | |
| Reading & writing | | | | | |

7. Applicant's Personal Life:

| | Not Observed | Poor | Average | Good | Very Good |
|---------------------------|--------------|------|---------|------|-----------|
| Biblical knowledge | | | | | |
| Prayer life | | | | | |
| Relationship with Christ | | | | | |
| Involvement in Evangelism | | | | | |

8. Applicant's Spiritual Maturity:

| | Not Observed | Poor | Average | Good | Very Good |
|---------------------------|--------------|------|---------|------|-----------|
| Emotional maturity | | | | | |
| Personal discipline | | | | | |
| Gift and talent | | | | | |
| Moral conduct | | | | | |
| Openness for new ideas | | | | | |
| Ability to face criticism | | | | | |

9. Are there any other areas that need to be developed while he is in LTS, BBSR?**10. Your Recommendation: (Tick the appropriate one)**

- ☐ Strongly recommend
- ☐ Recommend
- ☐ Recommend with reservation
- ☐ Do Not Recommend

11. Please Explain the reasons why you recommend / do not recommend?

12. If you have your own ministry would you like to take him/ her back to work with you after his/ her study? Yes / No, Explain?



LTS

Name:

Designation:

Institution:

Address:

Signature with Seal

Date:



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SPONSORSHIP FORM

(This form should be filled by the sponsor - Church/Organization/individual)

ADMISSION SOUGHT FOR: (Tick the appropriate box)

☐ Bachelor of Theology ☐ Diploma in Theology

☐ Master of Divinity

I hereby solemnly undertake to pay the sum of Rs. _____ per year towards the financial support of Mr./Ms./Mrs. _____ for the entire period of his/her study at Life Theological Seminary. I promised to send the funds to the Chief Financial Administrator either in full or installments on or before the specified dates as agreed upon.

Sponsor Name: _____

Sponsoring organization (Seal / Stamp)

Sponsor Signature: _____

Date: _____

DECLARATION:

I hereby solemnly declare that all the information given above is true to the best of my knowledge. I understand that any information found to be inaccurate will lead to penal action including summary dismissal from Life Theological Seminary. I also assure that if I am provided any financial aid or work-scholarship, I will gladly fulfil all the necessary work requirements to the complete satisfaction of my supervisor. I also promise that if there is any change of situation in my financial status, I will inform Life Theological Seminary at the earliest.

Student Name: _____

Address: _____

Student Signature: _____

Date: _____



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Check list of Submitted Documents (Kindly tick the appropriate boxes)

Student Name: _____

Program of Studies: _____

| SN. | REQUIRED DOCUMENT | Yes | No |
|-----|---|-----|----|
| 1 | <input type="checkbox"/> 10th Certificates and Mark sheet (Original & Xerox) <input type="checkbox"/> 12th Certificates and Mark sheet (Original & Xerox) | | |
| 2 | <input type="checkbox"/> Bachelor Degree Certificate and Mark sheet (Original & Xerox) <input type="checkbox"/> Post Graduate Degree Certificate and Mark sheet (Original & Xerox) | | |
| 3 | <input type="checkbox"/> B.Th. Transcript and Certificate (Only students applying for B.Th. /M. Div. Upgraders) <input type="checkbox"/> Dip.Th. Transcript and Certificate | | |
| 4 | Transfer Certificate / Migration Certificate | | |
| 5 | Testimony of Salvation and Call to Christian Ministry | | |
| 6 | Recommendations letter from Church | | |
| 7 | Sponsorship form | | |
| 8 | Medical Fitness Certificate | | |
| 9 | Photocopy of Aadhaar card (Color) | | |
| 10 | Baptism Certificate | | |
| 11 | Reference Letter from Church Leader / Spiritual Mentor | | |
| 12 | Application Fee of Rs. 250/ | | |
| 13 | Completed Application Form | | |

FOR OFFICE USE ONLY

Interview Intimation Sent on : _____

Interview fixed to be held on : _____

Interview Result : _____

Date of joining : _____

Have all the required documents been submitted : _____

Date of Admission : _____

Director of Admission Signature