

Sam Higginbottom University of Agriculture, Technology and Sciences

Uttar Pradesh State Act No. 35 of 2016

FACULTY OF THEOLOGY

CENTRE FOR ADVANCED THEOLOGICAL STUDIES



PRELIMINARY APPLICATION FORM – Admission 20.....

**Ph.D. in Christian Studies**

1. Candidate's Full Name.....  
(Capital Letter)

2. Father's /Husband's name .....

3. Mother's Name.....

4. Mailing Address.....  
.....

City .....State..... Pin Code.....

Mobile ..... e-mail .....

5. Church Membership.....6. Monthly income of Parents/Self.....

7. Educational Qualification

Exam Passed	Board/University	Name of Institution	Division	Percentage of marks	Year of Passing

8. Mother Tongue .....Languages (speak, read and write).....

9. Name, Address and Phone no of Bishop/Pastor/Head of the Church .....

10. Why do you want to join SHIATS for theological Studies?  
.....

11. Will you be willing to obey the Rules and Regulations of SHIATS? Yes/No

**DECLARATION**

All the information given in this application is correct to the best of my knowledge. In case any information is found incorrect/incomplete or false, my admission may be treated as cancelled.

Date.....

Full Signature

**P.T.O.**

**Please send the following with the completed Application Form:-**

1. Photocopy of the following Documents:
  - a. **School & Degree Certificates & Marks Sheets**
  - b. **Migration/Transfer Certificate.**
2. Letter of recommendation from the Bishop/Pastor/ Head of the Institution
3. Financial Sponsorship Letter from Parents/Guardian/Head of the Institution.
4. A Personal Testimony.
5. Medical Fitness Certificate.

*Send the Application with documents to*

***Deputy Registrar***

**Faculty of Theology, SHUATS, Agriculture University,  
Naini, Allahabad-211007, U.P., India.**

**Contact: 0532-2684507, 08953807646 Email ID:mathew.samp@gmail.com**