



ST. ANDREW'S COLLEGE  
SASKATOON, SASK.

Telephone: (306) 966-8970  
Toll-free: 1-877-644-8970  
Fax: (306) 966-8981

**APPLICATION FOR ADMISSION**  
Dual Degree – BTh-MDiv

**1. Personal Information**

Name \_\_\_\_\_  
Surname (please print)                      Given names

E-mail address \_\_\_\_\_

Permanent address \_\_\_\_\_

Postal code \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Citizenship \_\_\_\_\_ Denomination \_\_\_\_\_

Social Insurance Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
*(Required for issuing tuition receipts for Income Tax purposes)*                      *Month/Day/Year*

*(required to provide access to e-mail and online courses;  
this information will be shared with Information Technology  
Services at the University of Saskatchewan)*

In case of emergency notify \_\_\_\_\_  
Name                      Address                      Telephone

**2.** The following items are for statistical purposes and financial aid budgeting and are optional.

Place of Birth \_\_\_\_\_

Name of Partner *(if any)*: \_\_\_\_\_

Dependants *(if any)*: \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_

3. Give details of your educational background. Transcripts of credits should be requested from each institution attended and sent directly from the institution to the Registrar, St. Andrew's College.

School	Location	Years Attended	Completion date (if applicable)
(a) High School Diploma			
_____			
_____			

(b) Other

\_\_\_\_\_

\_\_\_\_\_

4. Have you been accepted into the University of Saskatchewan? Yes \_\_\_\_ No \_\_\_\_  
 If no please indicate the university you have been accepted into. \_\_\_\_\_

A copy of the acceptance letter must accompany this application.

5. Are you seeking ordination? Yes \_\_\_\_ No \_\_\_\_  
**If yes in the United Church of Canada, please answer the following questions:**

- a) Have you completed the Discernment process? Yes \_\_\_\_ No \_\_\_\_  
 b) If yes, please arrange for confirmation of Candidacy status to be sent from your Presbytery to the College.  
 c) If no, have you begun the Discernment process? Yes \_\_\_\_ No \_\_\_\_  
 d) Name of Presbytery \_\_\_\_\_ Name of Conference \_\_\_\_\_  
 e) Have you discussed your financial plan with your Discernment Committee or Presbytery Education and Students Committee? Yes \_\_\_\_ No \_\_\_\_

**If yes in another denomination, what denomination?** \_\_\_\_\_  
 Please provide a letter of support from your denominational body outlining the plan for completing the ministry practicum and your denominational requirements.  
**If no, please indicate how/where you intend to complete the ministry practicum.**

6. Give a brief statement of your financial status and plan for meeting all expenses while at the college.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. a) Do you wish to begin studies in Saskatoon or at a distance? \_\_\_\_\_  
 b) If you plan on coming to Saskatoon and would like information on staying in residence at St. Andrew's (plus rates and availability) - please call 1-877-644-8970.

8. **Autobiography:** Please attach to this application an autobiographical sketch including such matters as your interests and hobbies, impressions and memories of family, peers, school, church, reactions to various significant people and events in your life which come readily to mind as meaningful in your development as a person, and your motives for seeking admission to this college.

Other relevant information, if any:

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9. Please enclose a WRITING SAMPLE that has been submitted for course work at least a Grade 12 level, or has been submitted for publication (including online). Three to ten pages in length.

10. **References:** Give names, addresses and occupations of THREE persons who can supply references for you, of whom at least one should be a member of the clergy and one a person who can attest to your academic ability (e.g. a high school teacher or a professor). Please send one copy of the required forms enclosed to each person named, with the request that the form be mailed directly to the Registrar, St. Andrew's College, Saskatoon, Saskatchewan. Print your name on each form before mailing it.

a) \_\_\_\_\_

\_\_\_\_\_

b) \_\_\_\_\_

\_\_\_\_\_

c) \_\_\_\_\_

\_\_\_\_\_

11. **Declaration:** I agree, if admitted to St. Andrew's College, to comply with the regulations of the College. I certify that the information I have provided on and in support of this application is complete and true in all respects and that no relevant information has been withheld. I understand that misrepresentation, falsification of documents, or withholding of requested information is regard to this application is a serious offence which may result in prosecution under the College's disciplinary regulations and/or the Criminal Code of Canada. I also understand that other institutions may be notified if such information is discovered.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

***Please Note: It is the applicant's responsibility to ensure that all supporting documentation reaches St. Andrew's College. The application will not be processed until all documentation and the non refundable application fee of \$75.00 are received.***

Please return completed form to:

Registrar  
St. Andrew's College  
1121 College Drive  
Saskatoon, Saskatchewan  
S7N 0W3

*Applications are accepted at any time, but for applicants wishing to hear about acceptance by mid-June, a completed application with all supporting documents must be received by May 1<sup>st</sup>.*

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*NOTE: "The use, retention and disclosure of personal information collected from this form is done in compliance with privacy legislation including, but not limited to, the Personal Information Protection and Electronic Documents Act (2000, c.5)."*

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## REFERENCE FORM

*Confidential statement concerning* \_\_\_\_\_

The Registrar of St. Andrew's College would appreciate a confidential statement from you concerning the person named above who has applied for admission to this School of Theology. Please indicate the length and nature of your relationship to the applicant. Information is desired especially on the following points: (1) character and personality (2) academic ability (3) emotional stability (4) leadership and vocational qualities (5) potential, in your opinion, for the full-time study of theology and ministry in the Church.

Date \_\_\_\_\_

Signed \_\_\_\_\_

Position and Title \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_

Name \_\_\_\_\_

*(please print)*

**PLEASE MAIL DIRECTLY TO:**  
REGISTRAR  
ST. ANDREW'S COLLEGE  
1121 COLLEGE DRIVE  
SASKATOON, SASKATCHEWAN  
S7N 0W3

\*This should NOT be returned to the Applicant\*