



HOLY SPIRIT

COLLEGE

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APPLICATION FOR GRADUATE ADMISSIONS

Please return the completed application form and a \$25 application fee made payable to *Holy Spirit College* to:
ADMISSIONS OFFICE, Holy Spirit College, 4465 Northside Drive, Atlanta, GA 30327

Applicant Information

Applying for Entry: Fall Semester 20__ / Spring Semester 20__ / Summer Semester 20__

Program of Interest: Master's Degree in Theological Studies (M.T.S.)

Master's Degree in Theology (M.Th.)

Master's in Religious Education (M.R.E.)

Enrollment Status: Full Time Part Time

Applicant's Name: _____
(First) (Middle) (Last)

Preferred Name: _____

Street Address: _____

City _____ State _____ Zip Code _____

County: _____ Country: _____

Preferred Phone Number: _____

Birthdate: _____ Place of Birth: _____

U.S. Citizen or Permanent Resident: Yes No If no, country of citizenship: _____

Visa Status: U.S. Citizen U.S. Permanent Resident Current Alien VISA

Would require I20 VISA

Student Social Security Number: _____ Gender: _____

Email Address: _____

Permanent Diaconate Religious Consecrated Laity

Religion: Practicing Roman Catholic Other _____

Academic History

College Graduation Date: _____ College GPA _____

Please list colleges attended, beginning with the most recent:

Name of School: _____ City: _____ State: _____

Dates of Attendance: _____ Degree Completed: _____

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Name of School: _____ City: _____ State: _____

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Transfer Students - List all colleges attended, beginning with the most recent:

Name of School: _____ City: _____ State: _____

Dates of Attendance: _____ GPA: _____ Area of Study: _____

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Name of School: _____ City: _____ State: _____

Dates of Attendance: _____ GPA: _____ Area of Study: _____

Please list any academic distinctions received in College: _____

Please discuss your interest in Roman Catholic Theology: _____

Please provide two letters of recommendation from individuals not related to the applicant who have a basis for making such a recommendation (one recommendation must be from an academic source).

Please send the above to:

Office of Admissions
Holy Spirit College
4465 Northside Drive, NW
Atlanta, GA 30327

Additional Information

Please tell us how you heard about Holy Spirit College: _____

Statement of Accuracy and Authenticity:

The information in this application is complete and accurate to the best of my knowledge. I will notify Holy Spirit College of any changes before and after enrollment.

Signed: _____ Date: _____

POLICY OF NON-DISCRIMINATION

Holy Spirit College admits students without regard to race, color, sex, national or ethnic origin to all the rights, privileges, programs, and other activities generally accorded or made available to students at the school. Priority in admission is given to Roman Catholic students in Communion with the Church. The College does not discriminate on the basis of race, color, religion, sex, national or ethnic origin in administration of its educational policies, scholarship and loan programs, and athletic and other college-administered programs.