

***Harding University – College of Bible and Religion
Master of Ministry – Application for Admission***

1. Full Name: _____
2. Date of Birth: _____ Country of Origin _____
3. Social Security Number: _____
4. Current Address: _____
City: _____ County: _____
State: _____ Zip: _____
Phone: _____ e-mail: _____
5. Permanent address: _____
City: _____ State: _____ Zip: _____
6. Current Employment: _____
7. Work Phone: _____ Alternate Phone: _____
8. Religious Preference: _____
9. Current Church Membership: _____
10. Current Ministry Involvement (if any): _____
11. Entering MMIN program: Fall _____ Spring _____ Summer _____ 20 _____
12. In chronological order, list all schools attended since high school.

Name of Institution*	Location	From-To	Degree/Date Received

*An official copy of your transcript(s) from every school listed above must be on file at Harding University before the application process can be completed. It is the applicant's responsibility to ensure that the transcripts are sent to Harding.

13. Concerning undergraduate Bible training please check all that apply:
- Have had a least eight courses (16 hours minimum) in Bible.
 - Have had at least four courses (8 hours minimum) in the Bible text.
 - Have had a course in biblical interpretation (grade of B or better).
 - Have had a course in biblical language.
 - Have had an orientation course to biblical research (grade of B or better).
14. What is your undergraduate cumulative grade point average (GPA)?
15. Will you be transferring in graduate Bible hours?
16. List any extracurricular and civic activities, organizations, or achievements. (Use additional sheet if needed).
17. List any significant life and ministry experiences you have had. (Use additional sheet if needed).
18. If you answer YES to any of the following questions, attach a statement giving details, and return it with this application. Circle the appropriate answer.
- a. Has academic or disciplinary action been taken against you by any college or professional organization? YES NO
 - b. Have you ever been convicted of a crime? YES NO
 - c. Have you ever been treated for alcohol/drug problems or had substance use problems? YES NO
 - d. Do you know of any problem that might otherwise adversely affect your admission to this program? YES NO

19. Contact Information

Father, if living: _____
Name Street Address

City/State Zip Phone Numbers

Mother, if living: _____
Name Street Address

City/State Zip Phone Numbers

Emergency Contact: _____
Name Street Address

City/State Zip Phone Numbers

20. References. Provide information in each category of those who can be contacted for additional information about you.

Teacher: _____
Name Street Address

City/State Zip Phone Numbers

Elder/Church Leader: _____
Name Street Address

City/State Zip Phone Numbers

Elder/Church Leader: _____
Name Street Address

City/State Zip Phone Numbers

21. Reference forms. In addition to the reference you have provided above, please send the attached reference forms to three individuals (other than relatives) who are familiar with your ability to serve in the church along with a stamped, addressed envelope to the address indicated on the form.

22. Essay. With this application please submit a goals statement of at least 500 words in which you explain why you wish to pursue the Master of Ministry degree and how you hope to use the knowledge and skills gained through the program in future ministry.

23. Agreement with a local church. Please provide the attached agreement to the local congregation you wish to serve as your church “laboratory.” Fill out the portion that is pertinent to you and provide the church with a stamped, addressed envelope. For a list of local churches willing to participate with volunteer workers please contact the Master of Ministry office <mmin@harding.edu>
24. This application should be accompanied by a \$25 application fee made payable to Harding University.
25. The information provided above is true and accurate to the best of my knowledge. By signing this application I agree that, if admitted, I will abide by all applicable regulations of Harding University, both those presently existing and those subsequently adopted.

Signature of Applicant

Date

26. Return completed application and direct all accompanying documentation to:
Dr. Bill Richardson
Harding University
College of Bible and Religion
Box 12280
Searcy, Arkansas 72149