ORIENTAL THEOLOGICAL SEMINARY

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**Dear Prospective Student,**

Greetings from OTS! Thank you for your interest in studying at Oriental Theological Seminary (OTS). Please carefully read the attached Application Forms, complete all required sections, and submit the documents listed below. Strict adherence to these instructions is required to ensure smooth processing of your application.

## Application Guidelines and Requirements

1. Submit a **duly completed Application Form**, with all entries written clearly in **BLOCK LETTERS**.
2. Affix a **recent passport-size photograph (mugshot only)**. Casual or candid photographs will not be accepted.
3. Ensure that your **name and personal details exactly match** those in your supporting documents, as these will be used for all official records and correspondence.
4. Attach a **bona fide church membership letter** from your local church.
5. Submit a **Health Form** completed after a thorough medical examination by a registered medical practitioner.
6. Provide **two completed Reference Forms provided in the Application Form**: One from your local church pastor and another from a professor/lecturer from the most recent college, seminary, or university attended
7. Submit a **Financial Form** duly completed and signed by the sending church, sponsor(s), or parents/family.
8. Enclose **attested copies of all diplomas/degrees and transcripts/marksheets** from high school onward. **Do not submit originals**; originals must be produced at the time of the interview.
9. Candidates who have appeared for their **BA/BSc/BCom final examinations and are awaiting results** are eligible to apply and appear for the interview.
10. All supporting documents must be **clear and legible**. Blurred or incomplete submissions will not be accepted.
11. A **non-refundable fee of Rs. 500/-** for the application and interview process must be paid on the day of the interview.
12. Applicants must indicate their **preferred interview date** in the Application Form.

## Interview Schedule

**Interview Round 1:** April 4, 2026 – Last date for submission: March 20, 2026

**Interview Round 2:** May 30, 2026 – Last date for submission: May 15, 2026

**Venue:** OTS Campus – **Time:** 9:00 AM

Applicants are advised to review their application thoroughly before submission. Incomplete applications or failure to follow the above instructions may result in delay or rejection. We look forward to receiving your application as you take this important step toward personal, spiritual, and academic preparation for Christian ministry at OTS.

**Sd/-**
**Dr. M. Sashi Jamir**
Academic Dean

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## APPLICATION FOR ADMISSIONS 2026-27

Recent Photo

**Tick the program you are applying for:**

- ☐ Master of Arts in Clinical Counseling (MACC)
- ☐ Master of Divinity (MDiv)
- ☐ Master of Theology (MTh)
- ☐ Doctor of Ministry (DMin)

APPLICANT DATA (*Please fill in with UPPERCASE*)

Name: (First) _____ (Last) _____

Date of Birth (D) _____(M)_____(Y)_____ Sex: M ☐ F ☐ Marital Status: S ☐ M ☐

If married, Spouse's name _____ No. of Children_____

Citizenship _____ Place of Birth_____

Mailing Address: _____

Phone No: (M) _____ (WhatsApp)_____

Father's name_____ Occupation _____

Mother's name _____ Occupation _____

Church_____

Name of the Pastor_____

List below the High School//Secondary School/College/Seminary/University you have attended or currently attending in chronological order.

Name of High School _____

City/Town _____ State _____

From Year to Year_____Division/GPA_____Percentage_____

Name of Secondary School _____

City/Town _____ State _____

From Year to Year_____Division/GPA_____Percentage_____

Name of College/Seminary/University _____

City/Town _____ State _____

From Year to Year_____Division/GPA_____Percentage_____

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If you have already earned a Master's degree, what is your area of specialization:

_____

Name of College/Seminary/University _____

City/Town _____ State _____

From Year to Year_____Division/GPA_____Percentage_____

If applying for the Master of Theology (MTh), fill in the name of College/Seminary from where you obtained your BD/MDiv degree:

College/Seminary/University_____

City/Town _____ State _____

From Year to Year_____Division/GPA_____Percentage_____

What will be your area of concentration/major discipline of studies for the MTh program?

☐ Biblical Studies (OT) ☐ Christian History

☐ Christian Theology/Ethics ☐ Scripture and Society

Research Topic:_____

_____

For the Doctor of Ministry (DMin) applicant, if you have already obtained your MTh degree, fill in the name of College/Seminary from where you received your MTh degree:

College/Seminary_____

City/Town _____ State _____

From Year to Year_____Grade_____Percentage_____

Which church/organization/institution are you currently engaged with:_____

_____

Area of interest for Research:

_____

_____

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How will you/your family be supported financially during your studies at OTS?

☐ Personal ☐ Family ☐ Church ☐ Organization (Give appropriate tick mark)

Attach self-attested photocopies of all educational transcripts/certificates of HSLC/HSSLC/ College/Seminary/University along with this form during submission. Do NOT submit the originals at this point. Bring the original documents at the time of the interview for verification.

Please tick your preference for the date of Interview:

☐ Interview Round 1 – **April 4, 2026** (Last Date for Submission of Forms: March 20, 2026)

☐ Interview Round 2 – **May 30, 2026** (Last Date for Submission of Forms: May 15, 2026)

You must select only one date and once your forms are submitted to the Admissions Office you are expected for the interview on the date you have ticked. Calling letter is NOT issued.

Date of Submission: _____/_____/_____ Applicant's Signature _____

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# HEALTH FORM

(To be completed by a professionally licensed medical doctor)

Good health is an essential requirement in ministry. Please fill in the form accordingly. We will keep your professional findings strictly confidential and thank you for your help in this admission process.

*Please fill in with UPPERCASE*

Name of the student_____

Sex: Male ☐ Female ☐ Age_____ Weight_____

General Appearance of health (Please comment)_____
_____

Ears_____ Nose_____ Throat_____

Eyes (visions and other conditions) _____

Any past major surgery/diseases_____

Abdomen _____

Skin (Eruption or lesions) _____

Any evidence of fatigue, depression, etc_____

Any communicable diseases_____

Any non-communicable diseases_____

Test for Malarial sickness: Positive ☐ Negative ☐ (Attach test result)

Test of substance abuse _____

Is the applicant under any prescribed medication? Yes ☐ No ☐

If yes, please give details _____

Summary of the present health condition (Please comment) _____
_____

Physician's name_____

Address_____

Signature & Office Seal _____

Please note: Without this professional form duly filled up, the applicant will not be considered for admission to the seminary. Please mail this form directly to:

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## FINANCIAL FORM

The overall administrative, development, library, hostel, and tuition fees is Rs. 1,08,000/- annually for the Master of Divinity; Rs. 1,03,000 for the Master of Arts in Clinical Counseling; Rs. 1,18,000 for the Master of Theology; and Rs. 1,67,000 for the Doctor of Ministry programs respectively. The above fees are payable in three installments. Mess fee is Rs. 2500 per person which is realized separately over and above the stated fees on a monthly basis. Pocket money, books, and incidentals may add up to another Rs. 3000 or more per month. In the event that the student is unable to pay the required fees, the Guarantor will be held responsible and the student will be asked to leave the institution as a consequence of failure to fulfil financial obligations.

*Please fill in with UPPER CASE*

Name of applicant _____

Address _____

Name of Parent(s)/Spouse/Sponsoring Church/Organization_____

_____

Address_____

Phone No _____WhatApp_____

Please indicate the amount guaranteed by your Parent(s)/Spouse/Sponsoring Church/Body:

Rs._____

In Words_____

Signature of Guarantor _____
(Parent/Spouse/Representative of Sponsoring Church/Organization)

Witness:

1. Name _____

   Signature _____

2. Name _____

   Signature _____

*Submit or mail the completed Application Form along with all required documents to:*

**Oriental Theological Seminary**
**142 Bade, BPO Singrijan**
**Chumoukedima 797103**
**Nagaland, India**

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**REFERENCE FORM 1 - Pastoral Recommendation (Page 1)**

**This portion is to be completed by applicant. This recommendation should be from the Pastor of the local church in which the applicant is a member.**

Name of the applicant _____

Signature of the applicant_____ Date_____

---

**Dear Pastor,**

The individual named above is applying for admission to Oriental Theological Seminary. This form is crucial in evaluating the applicant's request for admission. Kindly give appropriate comments.

**Please tick according to your observation**

| | Not Observed | Weak | Average | Good | Excellent | Out-Standing |
|---|---|---|---|---|---|---|
| Intellectual ability | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to work with others | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Initiative | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Creativity and Imagination | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Maturity | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Interpersonal skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Self-confidence | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Self-discipline | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Verbal Communication | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Quality of work | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Leadership Skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to handle problems | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Motivation for higher Study | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Motivation for Ministry | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to accept criticism | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to accept correction | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

How long have you known the applicant?_____

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**REFERENCE FORM 1 - Pastoral Recommendation (Page 2)**

Please provide us with a statement concerning the applicant's spiritual maturity, abilities, personality, character, and professional promise. Also include in your statement an assessment of his or her strengths and weaknesses. Use additional paper if necessary:

I recommend this applicant for admission to Oriental Theological Seminary:

☐ Highly recommend ☐ Recommend ☐ Recommend with Reservation ☐ Do not Recommend

Your name_____ Signature_____ Date_____

Position_____ Churchj_____

Address_____

Phone number: _____WhatsApp:_____

**Mail/Send directly to:**

Admissions Office, Oriental Theological Seminary, 142 Bade, BPO Singrijan, Chumoukedima 797103, Nagaland

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**REFERENCE FORM 2 – Professor/Lecturer (Page 1)**

**This portion is to be completed by applicant. This recommendation should be from a Professor/Lecturer in which the applicant last attended.**

Name of the applicant _____

Signature of the applicant_____ Date_____

---

**Dear Professor/Lecture,**

The individual named above is applying for admission to Oriental Theological Seminary. This form is crucial in evaluating the applicant's request for admission. Kindly give appropriate comments.

**Please tick according to your observation**

| | Not Observed | Weak | Average | Good | Excellent | Out-Standing |
|---|---|---|---|---|---|---|
| Intellectual ability | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to work with others | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Initiative | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Creativity and Imagination | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Maturity | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Interpersonal skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Self-confidence | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Self-discipline | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Verbal Communication | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Quality of work | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Leadership Skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to handle problems | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Motivation for higher Study | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Motivation for Ministry | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to accept criticism | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ability to accept correction | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

How long have you known the applicant?_____

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**REFERENCE FORM 2 – Professor/Lecturer (Page 2)**

Please provide us with a statement concerning the applicant's spiritual maturity, abilities, personality, character, and professional promise. Also include in your statement an assessment of his or her strengths and weaknesses. Use additional paper if necessary:

I recommend this applicant for admission to Oriental Theological Seminary:

☐ Highly recommend ☐ Recommend ☐ Recommend with Reservation ☐ Do not Recommend

Your name_____ Signature_____ Date_____

Position_____ Institution_____

Address_____

Phone number: _____WhatsApp:_____

**Mail/Send directly to:**

Admissions Office, Oriental Theological Seminary, 142 Bade, BPO Singrijan, Chumoukedima 797103, Nagaland