

OFFICE USE ONLY	
Entry Code	
Student ID #	
Application Fee Paid	

## APPLICATION FORM FOR 2018-19 ADMISSION

Please fill-in or ✓ responses as appropriate. Return completed form, **along with a non-refundable Application Fee of \$45.00 (\$250 International Students)** to: *Office of the Registrar, Newman Theological College, 10012 - 84 Street N.W., Edmonton, AB T6A 0B2, Phone: 780.392.2451, Toll Free: 1.844.392.2450, Fax: 780.462.4013*  
**Email: registrar@newman.edu**

**NAME** \_\_\_\_\_  
First / Middle / Last

**DATE OF BIRTH** \_\_\_\_\_ **PREFERRED NAME** \_\_\_\_\_  
Day/Month/Year

**FORMER NAME** (if applicable) \_\_\_\_\_

**HOME ADDRESS** \_\_\_\_\_  
Street / Box # / R.R.

\_\_\_\_\_ Town / City Province Postal Code Country (other than Canada)

( ) ( )  
Home Phone Alternate Phone E-mail Address

**ADDRESS WHILST STUDYING AT NEWMAN** (if different from above)

\_\_\_\_\_ Street / Box # / R.R.

\_\_\_\_\_ Town / City Province Postal Code Country (other than Canada)

( ) ( )  
Home Phone Alternate Phone E-mail Address

**Emergency Contact:** \_\_\_\_\_ ( )  
Name & Relationship to You Phone Number

\_\_\_ Male \_\_\_ Female \_\_\_ Lay \_\_\_ Ordained

**SOCIAL INSURANCE NUMBER** \_\_\_\_\_

**CITIZENSHIP**

\_\_\_ I am a Canadian citizen; \_\_\_ I am a \_\_\_\_\_ citizen; \_\_\_ I am a landed immigrant;

\_\_\_ I hold a student visa; \_\_\_\_\_  
(please provide a copy) date of entry (dd/mm/yy) date of expiry (dd/mm/yy)

\_\_\_ I am a permanent resident

**TOFEL SCORE /IELTS SCORE/ ESL 140/145 SCORE** (If English is not your first language)

\_\_\_ Paper Based Test \_\_\_\_\_ Paper Based Test  
+ TWE \_\_\_\_\_ ESL 140/145 \_\_\_\_\_  
\_\_\_ IELTS Total Score \_\_\_\_\_ Computer Based \_\_\_\_\_ TOEFL iBT \_\_\_\_\_

**RELIGIOUS AFFILIATION**

Religious Affiliation \_\_\_\_\_ Parish \_\_\_\_\_

Religious Order (if applicable) \_\_\_\_\_

**PLEASE TELL US HOW YOU HEARD ABOUT NEWMAN THEOLOGICAL COLLEGE** (Select one option only.)

\_\_\_ Alumni/Friend/Family \_\_\_ Diocese \_\_\_ Parish \_\_\_ School Board \_\_\_ Print Ad  
\_\_\_ Website \_\_\_ Social Media \_\_\_ Mail-out \_\_\_ Event Display \_\_\_ Other \_\_\_\_\_

**ACADEMIC HISTORY**

**HIGH SCHOOL**

Last grade completed \_\_\_\_\_ Last year attended (e.g. 2008) \_\_\_\_\_ Diploma received?  Y  N or \_\_\_\_\_  
Name of high school \_\_\_\_\_ City & Province \_\_\_\_\_

**POST SECONDARY**

Name of Institution \_\_\_\_\_ City & Province \_\_\_\_\_  
Level achieved (C-certificate, DP-diploma, DG-degree) \_\_\_\_\_ Years attended (e.g.2006-09) \_\_\_\_\_  
Program/Faculty \_\_\_\_\_  
Name of Institution \_\_\_\_\_ City & Province \_\_\_\_\_  
Level achieved (C-certificate, DP-diploma, DG-degree) \_\_\_\_\_ Years attended (e.g.2006-09) \_\_\_\_\_  
Program/Faculty \_\_\_\_\_

**START TERM**

\_\_\_\_\_ Fall (Sept.) \_\_\_\_\_ Winter (Jan.) \_\_\_\_\_ Intersession (May) \_\_\_\_\_ Summer (July)

**ENROLMENT STATUS & PROGRAM OF STUDY**

\_\_\_\_\_ Full-time (9+ credits) \_\_\_\_\_ Part-time (less than 9 credits)

**Open Studies:**

\_\_\_\_\_ Auditor (no credits)  
\_\_\_\_\_ Unclassified (credits, not working for degree or diploma or no program declared)  
\_\_\_\_\_ Visiting (transfer of credits to another institution)

**MOTHER TONGUE** (first language spoken and still understood)

\_\_\_\_\_ English \_\_\_\_\_ French \_\_\_\_\_ Other (please specify) \_\_\_\_\_

**SELECT A PROGRAM**

**Theology:**

\_\_\_\_\_ Master of Theology, M.Th. \_\_\_\_\_ Bachelor of Theology B.Th.  
\_\_\_\_\_ Master of Theological Studies, M.T.S. \_\_\_\_\_ Diploma of Theology Dip.Th.  
\_\_\_\_\_ Master of Divinity, M.Div. \_\_\_\_\_ Certificate of Theology C.Th.:  
(General Lay: \_\_ Scripture: \_\_ Diac: \_\_ Angl: \_\_)

**Religious Education:**

\_\_\_\_\_ Master of Religious Education, M.R.E. \_\_\_\_\_ Graduate Certificate in Catholic School Administration, G.C.C.S.A.

**RE-ADMISSION:** \_\_\_\_\_ **MATURE (no undergraduate degree):** \_\_\_\_\_

**APPLICANT CHECKLIST**

The official copies of the following documents will be sent directly to NTC:

\_\_\_\_\_ High school transcripts \_\_\_\_\_ All post-secondary transcripts \_\_\_\_\_ TOEFL/IELTS score \_\_\_\_\_ Other (references etc.)  
\_\_\_\_\_ \$45.00 non-refundable application fee/ \$250.00 International Student Fee \_\_\_\_\_ \$500.00 Re-admission Fee

Paid via: \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Cheque

Card number \_\_\_\_\_ Expiry date \_\_\_\_\_ / \_\_\_\_\_

Name on credit card \_\_\_\_\_ CVV: \_\_\_\_\_

The personal information collected on this application form is used to maintain NTC records in processing your enrolment, monitoring academic progress, providing tax receipts, distributing follow-up College-related information, College research, awards, graduation and fundraising/alumni contact. In signing this form, an individual consents to the use of their personal information for these purposes by NTC or disclosure to third parties for operational purposes that are consistent with the mission of NTC or as required by the Statistics Act (Canada) or by the government of Alberta. This information is collected under the authority of the *Freedom of Information and Protection of Privacy Act* section 33(c). If you have any questions about the collection of your personal information, please contact the Privacy Officer, Dr. Jason West, at 10012-84 Street NW, Edmonton, AB T6A 0B2 or by telephone at (780) 392-2450.

I agree to be governed by the policies, rules and regulations as set forth by NTC. I acknowledge that I have read the NTC Privacy Commitment (as it may be updated from time to time) located at [www.newman.edu/privacy](http://www.newman.edu/privacy) and hereby consent to the collection, use and disclosure by NTC and the Archdiocese of Edmonton and its agents of my personal information (whether previously collected or to be collected) for the purposes identified in the NTC Privacy Commitment.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\* Please see website for information on available bursaries \***