

CHRISTIAN ACADEMY FOR LEADERSHIP STUDIES

Accredited Member of Nations Association for Theological Accreditation (NATA)

South India Christian Council, Bangalore

H.O.: 8/69C, Harris House, Alanchi Road, Rithapuram - 629 159.

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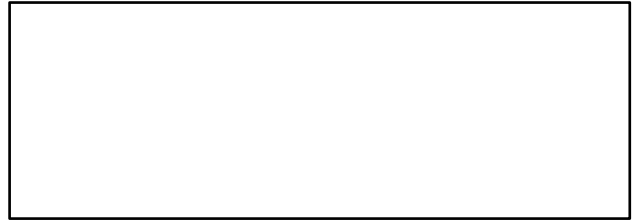
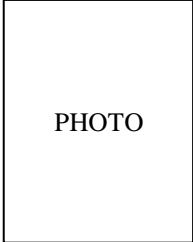
Study Centre:

Study Centre Code No:

No:

Please tick the course you prefer (✓)	
D.C.L. - Doctor in Christian Leadership	<input type="checkbox"/>
D.D. - Doctor of Divinity	<input type="checkbox"/>
D.Min - Doctor of Ministry	<input type="checkbox"/>
D.Litt. - Doctor of Literature	<input type="checkbox"/>
Ph.D. - Doctor of Philosophy	<input type="checkbox"/>

1. Name :
2. Date of Birth : Age:Years
3. Father's/ Husband's Name :
4. Church Denomination :
5. Years of Experience in Ministry :
6. Your Present Position in Church : Pastor/ Evangelist/ Deacon/Teacher / Believer
7. Are you married? (Yes/No) If yes, spouse name: No of Children:
8. Are you a Divorcee? (Yes/No) If yes, reason
9. Permanent Address:
10. Present Address:



11. Nationality : Mother Tongue:.....
12. Phone (with code) : Cell: Email:
13. Educational Qualification : Secular Theology
14. Name & Address of Last Institution, you studied:
15. Name of your church Pastor :
16. Your Church Location/ Place :
17. Cash/ D.D. Number : Bank: DD/MO Date:

DECLARATION

I, hereby, declare that all the information given above are true to the best of my knowledge. I am solely responsible for my Christian life and conduct.

Date:

Signature of the Candidate

18. Please Attach
 - i) Xerox copies of all certificates and Mark sheets. (if possible, SSLC onwards)
 - ii) Brief Testimony of Conversion and Two Photos

FOR OFFICIAL USE ONLY:

Register Number:

ADMISSION GRANTED/REJECTED

Remarks if any:

Office Seal

Date: