



# VERITAS SUMMIT COLLEGE

## STUDENT APPLICATION

### STUDENT NAME AND PERSONAL INFORMATION:

Title:  Apostle  Pastor  Evangelist  Dr.  Reverend  Bishop  Minister

Name: \_\_\_\_\_ Email: \_\_\_\_\_

**ADDRESS:** Street \_\_\_\_\_ Apt/Unit/Suite/Block: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

**MARITAL STATUS:**  Married  Single  Divorced  Widowed

**DATE OF BIRTH:** \_\_\_\_\_ SEX:  Male  Female

**PLACE OF BIRTH:** City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No (if yes, please provide details via attachment)

Have you been "Born Again"?  Yes  No  Not sure If yes, how long? \_\_\_\_\_

Are you an ordained, licensed, or commissioned minister?  Yes  No If yes, please indicate below:

Year Licensed \_\_\_\_\_ Commissioned/Year \_\_\_\_\_ By \_\_\_\_\_

Name of Church \_\_\_\_\_ Denomination: \_\_\_\_\_

### DEGREE AND CERTIFICATE PROGRAMS OFFERED:

- CHAPLAINCY
- ASSOCIATES DEGREE – GED or HS Diploma required
- MASTERS DEGREE - Bachelors Degree required
- CERTIFICATE - No pre-requisite requirements
- BACHELORS DEGREE - Associate Degree is required
- DOCTORATE DEGREE - Masters Degree required

### EDUCATION HISTORY

List any High School, vocational, college/university, completed. Start with the most recent achievement.

NAME OF SCHOOL	YEAR	DEGREE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**APPLICATION AGREEMENT**

I understand that I will be provided with a complete published statement of the standards of conduct found in the Student Handbook. In addition, I understand that Veritas Summit College is a religious institution, and no claim is made that any secular school will accept course work done at this school.

I hereby grant permission to Veritas Summit College to verify all of the information listed on this application. I hereby agree and understand that I will complete all course requirements as unto the Lord Jesus Christ in the spirit of excellence, and I will comply with all seminary policies and financial commitments in pursuit of academic excellence in the Word of God.

I hereby further understand that all of the courses and degrees of VSC (RTS) are of an ecclesiastical nature and, whether granted or conferred, are in the restricted area of religion with the special purpose of preparing persons to work in the area of religion – whether Educational,

Ministerial, or Counseling – and our courses, depending upon your college or university of choice, may be accepted with their academic guidelines.

**ADDITIONAL ENROLLMENT REQUIREMENTS**

Each candidate must submit the following to complete enrollment. Provide as much of the following as possible, at the time of application.

1. A current Resume or BIO (including any educational background or experience in ministry, counseling, or related profession or vocation).
2. A recent photo of yourself.
3. Proof of ministry credentials, if applicable (ordination, license, or commission) in the form of a photocopy or official letter.
4. A copy of the highest diploma, certificate, or degree earned and related transcript.
5. A letter of reference from your pastor or an elder in your church.
6. \$50 Application fee (non-refundable).

**TUITION AND FEES:** Tuition and fees are subjected to change. Our preferred payment is via links found on our website at [veritassummitcollege.com](http://veritassummitcollege.com) using your debit or credit card via Paypal. Checks and Money Orders are made payable to Veritas Summit College and mailed to our address shown below.

Application/Enrollment Fee being remitted by:

- Enrollment Fee only (\$70)       Husband & Wife Enrollment Fee (\$105)
  - Veteran, Active Military, Disabled, or Retiree Enrollment Fee (\$50)
- Payment option:       Credit Card/PayPal       Check/Money Order

**Mail Checks, money orders to:**

Veritas Summit College. c/o Admissions Department. 110 Walter Way, Ste 158, Stockbridge, GA 30281

I declare that the information reported on this application is true, complete, and accurate, and that withholding information or giving false information constitutes prima facie (Latin meaning “upon first sight”) for denial of admission

Signed by:

\_\_\_\_\_  
Signature of Applicant (Required)

\_\_\_\_\_  
Date

**For Official Use Only:**

This section must not be filled in unless by a representative of the Administration Department.

Registration Fee Received: Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Received By: \_\_\_\_\_