

APPLICATION FOR ADMISSION

- Lombard Campus
 Lawndale Campus

PERSONAL INFORMATION

Full Legal Name Last: _____ First: _____ Middle: _____

Other Last Names (currently or previously used): _____

Social Security Number: _____ - _____ - _____ Daytime Telephone Number: (____) _____

Evening Telephone Number: (____) _____ Cell Phone Number: (____) _____

E-mail address: _____

Home mailing address:

Street: _____ City: _____ State: _____ Zip Code: _____

Telephone Number: (____) _____

If admitted, will you be seeking on-campus housing? Yes No If yes, for how many people: _____

REGISTRATION INFORMATION

When do you plan to begin studies? Year _____ Fall Winter Spring Summer

Have you applied to Northern in the past? Yes No

If yes, please give date of application and name under which you applied:

Name: _____ Date: ____/____/____

Do you expect to be enrolled full or part-time? Full-time Part-time

Do you plan to transfer credits into Northern? Yes No

Please list other seminaries to which you may be applying: _____

To which program are you seeking admission:

Master's Programs:

- Master of Divinity (MDiv)
- Master of Arts in Christian Ministries (MACM)
- Master of Arts in Theology and Mission (MATM)
- Master of Arts in New Testament (MANT)
- Master of Arts in Worship (MAW)

Other Programs:

- Graduate Certificate
- Ministry-Based Certificate (The Transforming Center)
- Student-At-Large (Up to 12 master's level credits taken for credit by students not enrolled for a degree)
- Visiting Student (Student enrolled at another seminary taking an occasional Northern course)
- Auditor