



St. Petersburg Seminary and Yeshiva

An Association of St. Petersburg Theological Seminary and Netzer David International Yeshiva
 Educating Servant Leaders For Ministry
 3190 Gulf to Bay Blvd., Clearwater, FL 33759
 727-399-0276

APPLICATION

<input type="checkbox"/> For Admission	<input type="checkbox"/> For Readmission	
Last Name:	First name:	Middle Name:
Social Security Number:		Student ID (assigned by Registrar's office):
Education Plans		Basis of Admission
<input type="checkbox"/> Certificate of Religious Studies		<input type="checkbox"/> Transfer student †
<input type="checkbox"/> Bachelor of Arts in Biblical Studies		<input type="checkbox"/> Associates of Arts Degree †
<input type="checkbox"/> Master of Arts in Biblical Studies		<input type="checkbox"/> Graduate School Ready † (undergraduate major: _____)
<input type="checkbox"/> Master of Arts in Counseling		<input type="checkbox"/> International Student †
<input type="checkbox"/> Master of Arts in Judaic Studies		<input type="checkbox"/> Adult, non-high school graduate, never enrolled in college #
<input type="checkbox"/> Master of Arts in Ministry (concentration: _____)		<input type="checkbox"/> Audit courses only (personal enrichment) *
<input type="checkbox"/> Master of Science in Religious Teacher Education		<input type="checkbox"/> Senior citizen (ages 65 and older) *
<input type="checkbox"/> Master of Divinity		<input type="checkbox"/> Denominational preparation †
<input type="checkbox"/> Doctor of Ministry		<input type="checkbox"/> Working for a degree elsewhere †
<input type="checkbox"/> Yeshiva - Bachelor of Arts in Judaic Studies		<input type="checkbox"/> Yeshiva CEU's †
<input type="checkbox"/> Yeshiva - Master of Arts in Judaic Studies		<input type="checkbox"/> Graduate CEU's †
<input type="checkbox"/> Yeshiva - Master of Rabbinic Studies		# References are required
<input type="checkbox"/> UMJC - Licensure and Ordination Courses		* Transcripts and references are not required
		† Transcripts and references are required

Have you previously applied to, or attended, this Seminary using a different name?
 Yes No If yes, under what name(s)? _____

Permanent Address:		Area Code:	Home phone:
		Area Code:	Cell phone:
		Area Code:	Work phone:
City	State	Zip Code	Email address (required):

In Emergency Notify

Name	Home Phone Number:
Address	Business Phone Number:

Gender	Birth Date	U.S. Citizen?	Do you have any difficulty with English Proficiency?
<input type="checkbox"/> Male <input type="checkbox"/> Female	Mo Da Yr	<input type="checkbox"/> Yes If not a U.S. Citizen, <input type="checkbox"/> No of what country? _____	<input type="checkbox"/> Yes If Yes, what is your native language? <input type="checkbox"/> No _____

Name of Church or Synagogue you currently attend:	Denomination:

High School or GED	Federal and state law requires information about the ethnic origin of our students	U.S. Immigration and Naturalization Service Status	
School:	Please check the appropriate box <input type="checkbox"/> Non-Resident Alien <input type="checkbox"/> Black, non-Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> White, non-Hispanic <input type="checkbox"/> Race/ethnicity unknown	If a Permanent Resident Alien, your number is:	
City & State:		On Probation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you eligible to return? <input type="checkbox"/> Yes <input type="checkbox"/> No



St. Petersburg Seminary and Yeshiva GENERAL REFERENCE STATEMENT

(To be completed by the referee, a friend or colleague who is familiar with the work and life habits of the applicant, and forwarded to the Admissions Office, St. Petersburg Seminary and Yeshiva, 3190 Gulf to Bay Blvd., Clearwater, FL 33759.)

I hereby waive my right to have access to this document when completed: _____
Applicant's signature

Student's Last Name	First Name	Name of Referee	
Address		Address	
City	State	Zip Code	City State Zip Code
		Position	Telephone No.

1. What is your relationship to the applicant?
 career colleague fellow student business associate other (please describe below)
2. How long have you known the applicant?
3. less than 1 year 1-2 years 3-4 years more than 4 years
4. How well do you know the applicant?
 slightly reasonably very well
5. If your association with the applicant is as a colleague, please indicate the nature of your relationship and the number of years during which he/she worked with you.

6. Please indicate your opinion of this applicant in comparison with others you have known at the same stage in their careers.

	Excellent	Above Average	Average	Below Average	Poor	No Basis for Judgment
MOTIVATION						
JUDGMENT						
COMMUNICATION SKILLS						
WORK HABITS						
INTEGRITY						
FAITH CONFESSION						

7. Would you recommend this candidate to St. Petersburg Theological Seminary?
 Highest Recommendation Recommend Would Not Recommend
 No Basis for Recommendation



St. Petersburg Seminary and Yeshiva PASTOR/RABBI REFERENCE STATEMENT

(To be completed by the referee, a friend or colleague who is familiar with the work and life habits of the applicant, and forwarded to the Admissions Office, St. Petersburg Seminary and Yeshiva, 3190 Gulf to Bay Blvd., Clearwater, FL 33759.)

I hereby waive my right to have access to this document when completed: _____

Applicant's signature

Student's Last Name	First Name	Name of Referee		
Address		Address		
City	State	Zip Code	City	State Zip Code
		Position	Telephone No.	

8. How long have you know the applicant?
 less than 1 year 1-2 years 3-4 years more than 4 years
9. How well do you know the applicant?
 slightly reasonably very well
3. As his/her pastor, the nature of your association with the applicant was as:
 Spiritual Advisor Administrative Supervisor Colleague Other. Please Explain

4. Please indicate the specific church or synagogue positions or services in which you have observed the applicant contribute.

5. Please indicate your opinion of this applicant in comparison with others you have known at the same stage in their careers.

	Excellent	Above Average	Average	Below Average	Poor	No Basis for Judgment
MOTIVATION						
JUDGMENT						
COMMUNICATION SKILLS						
WORK HABITS						
INTEGRITY						
FAITH CONFESSION						

6. Would you recommend this candidate to St. Petersburg Theological Seminary?
 Highest Recommendation Recommend Would Not Recommend
 No Basis for Recommendation



St. Petersburg Seminary and Yeshiva TEACHER REFERENCE STATEMENT

(To be completed by the referee, a friend or colleague who is familiar with the work and life habits of the applicant, and forwarded to the Admissions Office, St. Petersburg Seminary and Yeshiva, 3190 Gulf to Bay Blvd., Clearwater, FL 33759.)

I hereby waive my right to have access to this document when completed: _____

Applicant's signature

Student's Last Name	First Name	Name of Referee		
Address		Address		
City	State	Zip Code	City	State Zip Code
		Position	Telephone No.	

10. How long have you know the applicant?
 less than 1 year 1-2 years 3-4 years more than 4 years

11. How well do you know the applicant?
 slightly reasonably very well

3. As his/her teacher, the nature of your association with the applicant was:
 Undergraduate Teacher Graduate Teacher Academic Advisor
 Other, Please Explain: _____

4. If your association with the applicant was as a teacher, please indicate the type of courses taken (formal schooling, workshop, conference, etc.) and the years during which he/she was your student.

5. Please indicate your opinion of this applicant in comparison with others you have known at the same stage in their careers.

	Excellent	Above Average	Average	Below Average	Poor	No Basis for Judgment
MOTIVATION						
JUDGMENT						
COMMUNICATION SKILLS						
WORK HABITS						
INTEGRITY						
FAITH CONFESSION						

6. Would you recommend this candidate to St. Petersburg Theological Seminary?
 Highest Recommendation Recommend Would Not Recommend
 No Basis for Recommendation

