



# HUGH GOLDIE LAY/THEOLOGICAL TRAINING INSTITUTION

(In Affiliation with ABIA STATE UNIVERSITY, UTURU)

P. O. BOX 107, AROCHUKWU, ABIA STATE, NIGERIA.

Email: [hglttia@gmail.com](mailto:hglttia@gmail.com)



No.

## APPLICATION FORM

### Available Programmes:

- 1) **CERTIFICATE IN THEOLOGY** – Candidates acquire knowledge in basic theology and pastoral courses.

*DURATION – 2 Semesters (1 Session).*

- 2) **DIPLOMA IN THEOLOGY** – A course for ministerial candidates and others. Offers broad knowledge in theological, religious and pastoral courses.

*DURATION – Full-Time: 6 Semesters (3 Sessions).*

*Part-Time (Summer/Sandwich Programme): 4 Years.*

*QUALIFICATION – At least 4 Credits in WASSCE, NECO, GCE, NABTEB or other equivalent certificates, including English and C.R.K.*

- 3) **BACHELOR OF DIVINITY (BD)** – A ministerial course for full-time pastors and other interested candidates.

*DURATION – Full-Time: 8 Semesters (4 Sessions).*

*Part-Time (Sandwich/Summer Contacts): 5 Sessions.*

*QUALIFICATION – At least 5 Credits in WASSCE, NECO, GCE, NABTEB or other equivalent certificates including English and C.R.K.*

- 4) **BACHELOR OF ARTS; Religious Studies (BA)** – Abia State University accredited and certificate issuing programme.

*DURATION – Same as BD.*

*QUALIFICATION – Same as BD.*

- 5) **DIRECT ENTRY for BA/BD Programmes** are available.

*DURATION – Full-Time: 6 Semesters (3 Sessions).*

*Part-Time: 4 Sessions.*

*QUALIFICATION – At least NCE/ND Certificate from recognized institutions with bias in Religious Studies and C.R.K.*

**N/B:** The BA and BD Programmes can be ran concurrently



**SECTION A**

**REGISTRATION FORM**

1. FULL NAME: .....

2. MAILING ADDRESS: .....

.....

3. PERMANENT HOME ADDRESS: .....

.....

4. GSM NO: .....

5. SEX: *(Please tick the appropriate box)*

 Male Female

6. MARITAL STATUS: *(Please tick the appropriate box)*

 Single Married Widowed Divorced

7. DATE OF BIRTH: .....

(Day)

(Month)

(Year)

8. NATIONALITY: .....

9. PLACE OF ORIGIN: Town/Village ..... LGA ..... State .....

10. COURSE OF STUDY:

 Cert. Dip. BD BA

11. TYPE OF PROGRAMME:

 Regular Sandwich

12. STUDENT'S STATUS:

 Private Ministerial

13. CHURCH AFFILIATION: .....

14. YEAR OF ENTRY: .....

15. SPONSORS' DETAILS:

A. ....

Name

GSM No.

B. ....

Name

GSM No.

C. ....

Name

GSM No.

16. THE PERSON TO CONTACT IN CASE OF EMERGENCY

Name: .....

Relationship: .....

Address: .....

Phone: .....

17. RELIGION: .....

Passport  
of the  
Applicant  
*(Red Background)*

18. AFFIX THE FOLLOWING:

- a. Letter of recommendation from your Session, if a ministerial candidate.
- b. If married, attach a letter of permission from your spouse.
- c. Relevant results/academic qualifications.
- d. Certificate of Local Government of Origin.
- e. A Proof of change of name (*if you have changed name at any point*).
- f. Health Certification (*from government hospital*).
- g. Baptismal and confirmation certificates.
- h. Submit in five files each with two passport photos on red background.

**N/B:** *Ensure that the originals of the documents provided above are available on the date of interview.*

**SECTION B**

**EDUCATIONAL AND PROFESSIONAL RECORDS**

19. PRIMARY, POST PRIMARY, UNIVERSITIES AND ANY OTHER

Name and Address of Institution	Years Attended (From – To)	Degree/Diploma or Certificates Obtained	Special Fields of Study
a. <u>Primary School(s)</u>			
b. <u>Secondary School(s)</u>			
c. <u>University(ies)</u>			
d. <u>Any Other</u>			

20. ENTRANCE QUALIFICATIONS (*Exams taken with results*)

SUBJECTS	WAEC	NECO	NABTEB	GCE	OND	HND	BSC	TC II	NCE	OTHER BODY
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
Exam Year										
Exam Centre										
Exam Number										

**SECTION D**

**DECLARATION BY APPLICANT**

I, ....., hereby declare that the particulars which I have supplied above are true to the best of my knowledge and belief.

.....

*Signature*

.....

*Date*

**SECTION E**

**FOR OFFICIAL USE ONLY**

I certify that the above named student has satisfied the conditions for admission in accordance with the affiliation regulations of Abia State University, Uturu and Hugh Goldie Lay/Theological Training Institution, Arochukwu.

Sign: .....  
Dean of Student's Affairs

.....  
Date

Sign: .....  
Dean of Academics

.....  
Date

Sign: .....  
Registrar

.....  
Date

**SECTION C**

**REFEREE'S REPORT ON THE CANDIDATE**

*(This section is to be sent to the Referee; the Referee must be a Senior Church Officer, Senior Civil Servant or a Lecturer in a recognised Higher Institution)*

The candidate whose name is given below wishes to undertake a programme in this institution. The institution will be grateful for your comments on the candidate's suitability for this programme.

Your comments will be regarded as confidential information. Please return the completed form direct to the Registrar of the institution.

**Part I**

*(To be completed by the candidate)*

1. Candidate's name: .....
2. Address: .....
3. Programme applied for: .....
4. Qualifications: .....

**Part II**

*(To be completed by the Referee)*

5. For how long and in what capacity have you known the candidate? .....
6. Please comment on the candidate's suitability to undertake this academic programme bearing in mind the following: intellectual ability and academic qualification: .....
7. Please comment on the candidate's personality (bearing in mind the following: moral character, emotional and physical ability and Christian life): .....
8. As a person well known to you, if the situation arises, will you be able to assist the candidate in settling issues connected with his/her studies?  Yes  No

Name of Referee: .....

Rank/Position: .....

Address: .....

Signature and Date: .....