



# PALMER THEOLOGICAL SEMINARY

## NON-MATRICULANT APPLICATION FOR ADMISSION

\_\_\_\_\_ Social Security #

1. \_\_\_\_\_ LAST  
NAME FIRST MIDDLE or MAIDEN

2. \_\_\_\_\_ (Current  
Address)

\_\_\_\_\_ (Telephone  
#) (Cell or Work)

3. Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

4. Country of citizenship? \_\_\_\_\_

If not a US citizen, what is your visa status? \_\_\_\_\_

5. Name of parents or nearest relative \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ ( )  
(Telephone #)

6. List all previous academic and/or professional training (post-secondary education):

<u>Name of School and Location</u>	<u>Dates of Attendance</u>	<u>Degree or Diploma</u>	<u>Date Received or Expected</u>
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a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

d. \_\_\_\_\_

8. Church Membership \_\_\_\_\_  
(Name of Church) (Address)

a. Denominational Body (American Baptist, National Baptist, United Methodist etc.) with which your church is affiliated:

\_\_\_\_\_

b. Name of Pastor \_\_\_\_\_

Address \_\_\_\_\_

Telephone# \_\_\_\_\_

9. For which term are you applying? \_\_\_\_\_

(FALL / SPRING)

(Year)

**Required:**

1. One Academic Transcript (undergraduate or graduate)
2. \$15.00 non-refundable Application Processing Fee

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please remember that should you decide to apply for admission into the degree program, you will need to complete the full application process. Please contact the Office of Admissions for the application.

**PALMER THEOLOGICAL SEMINARY  
OFFICE OF ADMISSIONS  
6 LANCASTER AVENUE  
WYNNEWOOD, PA 19096  
610-645-9321 / semadmis@eastern.edu**