



*Exploring Differences, Deepening Faith*

## **BLACK MINISTRIES PROGRAM: APPLICATION INSTRUCTIONS**

- ☞ Completed applications for the Black Ministries Program (BMP) and all supporting materials are accepted on a rolling admissions basis. Decisions on applications submitted take approximately 6-12 working days after all the materials are received. All admission decisions are made by the program directors; applicants will be notified of their status by mail.
- ☞ The BMP welcomes all students of all religions and denominational backgrounds. A baccalaureate degree is not required for admissions; however, courses from the program can be used toward an undergraduate degree through Charter Oak Community College. Other undergraduate institutions may award credit for ministry certificate program courses at their discretion. *Students who think they may want to seek undergraduate credit for their courses must opt for letter grades.* Students with advanced degrees can earn CEU credit for the courses.
- ☞ The applicant must supply the following:
  - 1) The completed application form and application fee of \$40.
  - 2) A personal statement of one to two pages in length. (Details outlined on application).
  - 3) Two letters of recommendation from persons able to assess the applicant's academic and professional potential: at least one letter needs to be from a minister or official of the denomination with which the applicant is affiliated. In order to facilitate this process, we recommend that you provide these persons with a stamped, pre-addressed envelope.

### **GENERAL INFORMATION**

- ☞ Tuition, fees, other related costs, and financial aid information are outlined in the [Hartford Seminary 2012/2013 catalogue](#), which can be made available at Hartford Seminary's Admission's offices. The cost of tuition for the Black Ministries Program is: \$210 per course (payable at the beginning of each course).
- ☞ Hartford Seminary's Certificate Programs provide limited, need-based financial aid assistance of up to 50% of the tuition (financial aid is not given for books). The financial aid section of the application must be complete in order to be considered.
- ☞ To check on the status of your application, please contact Marcia Pavao, Admissions Office, at (860) 509-9512 or email: [mpavao@hartsem.edu](mailto:mpavao@hartsem.edu).

*Hartford Seminary policy prohibits discrimination against any individual on the basis of race, sex, sexual orientation, religious creed, color, age, national or ethnic origin, ancestry, marital status, present or past history of mental disorder, mental retardation, learning disability or physical disability including, but not limited to, blindness or veteran status, or any other reason prohibited by an applicable law or regulation in the employment of faculty, staff, and students; in the recruitment and admission of students; and in the operation of all Seminary programs, activities, and services. Additionally, the Seminary will not condone acts of violence or harassment reflecting bias or intolerance of any of the above mentioned classes. Evidence of practices that are inconsistent with this policy should be reported to the Office of the Dean.*



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**BLACK MINISTRIES PROGRAM:**

**Please return all materials with your application fee of \$40 to:**

**Semester and year in which you plan to begin studies:**

Fall    Spring   Year \_\_\_\_\_



**Personal Information**

Name \_\_\_\_\_  
Title (Rev., Mr., Mrs., Ms., etc.)   First   Middle Initial   Last

Home Address \_\_\_\_\_  
Street   City   State   Zip Code

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Home E-mail \_\_\_\_\_

Work Place and Full Address \_\_\_\_\_  
Name of Employer   Street   City

Work Phone (\_\_\_\_\_) \_\_\_\_\_ Work E-mail \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_ U.S. Citizen?    Yes    No

Religious Affiliation \_\_\_\_\_  
(i.e. AME, American Baptist, Seven Day Adventist, UCC)

Name of Pastor or Religious Leader \_\_\_\_\_

Place of Worship and Address \_\_\_\_\_  
Title   Street   City   State   Zip Code

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**Educational Information**

Please list all high schools, colleges, professional and graduate schools you have attended, beginning with the institution you most recently attended.

School Name and Location	Dates Attended	Degree Received

Undergraduate Major \_\_\_\_\_ Graduate Field \_\_\_\_\_

**Work Experience**

Please list your present position first. Please include dates of employment, title, institution and location, and nature of work.

Employer Name and Address	Title/Nature of Work	Dates of Employment

**Church Positions and Responsibilities**

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**Employment, Community or Academic Honors Received**

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**Community or Other Activities and Interests**

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## Personal Statement

Enclose a 1-2 page (double spaced) typewritten statement reflecting on the following areas. Please take the time to construct your statement carefully, as this sample will be used to determine your writing proficiency. Your application will not be processed without your personal statement.

- A. Your goals in seeking theological education and the personal experiences which have led you to make this decision.
- B. The reason(s) you have chosen the Black Ministries Program at Hartford Seminary and your expectations of the program.
- C. The life experiences that have most significantly shaped your values and who you are as a person.
- D. Any further information you feel we should be aware of as we review your application.

## FINANCIAL AID APPLICATION

**Applicants who are applying for financial aid must complete this section. Incomplete requests will not be processed.**

**Please attach a copy of your income tax return for the previous year, or a copy of your pay stub.**

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Phone (\_\_\_\_) \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Academic Year \_\_\_\_\_ Scholarship Amount Requested (max awarded 50% per course) \$ \_\_\_\_\_

Is your participation in this program dependent on receipt of this financial aid?  Yes  No

If "yes", please explain and list dependents and/or unusual circumstances we should consider:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer \_\_\_\_\_

Employer Address \_\_\_\_\_  
Street City State Zip Code

Employer Phone (\_\_\_\_) \_\_\_\_\_ Monthly Salary \_\_\_\_\_

Monthly Expenses \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By my signature I certify that the above information is accurate to the best of my knowledge.  
I understand that all information pertaining to this application will remain confidential.**

Name of Student \_\_\_\_\_ Signature \_\_\_\_\_

## Recommendations

*Two letters of recommendation are required.* One letter must be from a professor, minister/religious official, or community/civic associate who can speak to your personal qualities, values and commitments. The second letter may be from a person of your choosing, however, it is recommended that the letter be from a second pastor or church member, if at all possible.

*Please list below the names and addresses of the two persons to whom you are sending the recommendation forms:*

### A) Minister/Religious Official/Community/Civic Associate Professor/Instructor or Professional Colleague

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Name	Address	Phone Number
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### B) Other

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Name	Address	Phone Number
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## Important Information

### Before mailing your application:

- Make sure the entire application is legible and complete.
- Include your personal statement.
- Letters of recommendation can be mailed or faxed by the recommenders or they can be mailed along with your application.
- Include your application fee of \$40. Make check or money order payable to: **Hartford Seminary** and please write “**BMP**” on the memo line.
- If applying for financial aid, be sure to completely fill out the financial aid section of the application and include a copy of your income tax return and/or copy of your pay stub.
- Send complete and signed application and all other supporting paper work to:

Hartford Seminary  
Attn: Admissions Coordinator  
77 Sherman Street  
Hartford, CT 06105

## Statement

By signing below you are stating that you wish your application to be reviewed by Hartford Seminary; that all information contained in the application is factually correct and honestly presented; that you understand that all materials submitted for the application remain confidential and become part of the permanent record of the school; and that these materials are not returnable.

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Signature

Date



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**BLACK MINISTRIES PROGRAM:  
RECOMMENDATION LETTER**

*Items in italics are to be completed by the applicant:*

*Name of Applicant:* \_\_\_\_\_

*Address of Applicant:* \_\_\_\_\_  
*Street City State Zip Code*

*Phone number/E-mail:* (\_\_\_\_\_) \_\_\_\_\_ *E-mail* \_\_\_\_\_

Hartford Seminary would appreciate a statement from you concerning the person named above. Please give us your frank appraisal of the applicant's ability and aptitude for study, personality, intellectual and spiritual maturity, and capacity for leadership. Your honesty will help us in doing a careful evaluation. You may attach additional sheets if necessary. This letter of recommendation can be mailed or faxed directly to the Seminary by you or you can give it to the applicant.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Name (please print) Title Relationship to Applicant

\_\_\_\_\_  
Address (\_\_\_\_\_) Phone Number



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\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Name (please print) Title Relationship to Applicant

\_\_\_\_\_  
Address (\_\_\_\_\_) Phone Number