APPLY FASTER ONLINE AT WWW.LUTHERRICE.EDU

LUTHER RIC	CE COLL	EGE AND SEM	INARY 23 1	FOR OFFICE USE	ONLY 24
30	38 Evans	Mill Road	F.O		
L	ithonia,	GA 30038			[] CR
	(770)48	34-1204		 REQ	
	(800)44	12-1577	HRS. 7	ΓRANS.	
(′	770) 484	-1155 Fax	HRS. T	THROUGH LR	
DATE					
S.S.#		-	-		
PLEASE CHI	ECK ON	Ε:			
New App	licant				
Readmiss	ion				
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		into the same de			
		a different deg gher degree	ree		
	Enter a m	gner degree			
	Dr.				
NAME OF	Rev.				
APPLICANT					
	Mrs. Miss	Last	First	Middle	Maiden
	IVIISS				
MAILING					
ADDRESS_					
		Street	or P.O. Box		
City		State	US	Zip Code	Country
1. Tel. # [cell]] ()			
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				ne important updates	via text and
voice	e messagii	ng. (Standard m	essaging charge	es apply).	
2. E-mail Add	ress				
(Required f					
3. Date of Birt	th				
4. Marital Sta	tus	_ single	married	divorced	
5. Sex	M	ale	Fema	ale	

6. Denomination	Baptist Pentecostal Other (plea	/Charisn	natic _	Presbyter Nondenor	
7. Ethnic Origin (Check	one of the fol	lowing)			
American Indian, Alask White, non-Hispanic		-	nic Pacific Islander		non-Hispanic esident Alien
8. Permanent Residence	State		Co	untry	
9. Are you an F-1 Visa st	tudent? [] Yes	s []	No	
10. Veteran or Active Du	ty Military	[]	Yes [] No	
11. Have you ever been o (If yes, please inclu] No
12. Institutions Attended	l (list school,	city, sta	nte)		
Name	N	lajor	Dates Attended	Degree Received	Office Use Only
High School					
College					
Seminary					
Other					
		_			

(High School transcript is not necessary for those applying to the Master or Doctoral programs.)

13. (Check the degree prograi	n for which	you are a	pplying	
[] For-credit Certificate	;		Not-for-credit Cert	ificate
[] B.A.R.	120 hrs	[]	M.A.L.	36 hrs
[B.A.Psych	120 hrs	[]	M.A.L. M.A.M. M.A.B.C. M.Div. D.Min.	36 hrs
Ī] M.A.A.	36 hrs	[]	M.A.B.C.	36 hrs
Ī	M.A.C.S.	36 hrs	ĪĪ	M.Div.	90 hrs
Ì	M.Div.	81 hrs	į į	D.Min.	30 hrs
Ī	Ph.D. Org Lead	48 hrs	ĺĺ	Ph.D. Chr Scripture	e 58 hrs
15. N	Bachelor Applicants Only [] Ministry [] M.Div. Applicants Only ([] Open Elective Track Church Membership Name of Church Address Address	Biblical Cour Choose one o	nseling f the follo Biblical	[] Christian vowing tracks) Language Track	Worldview
	Web Address Pastor's Name Phone				
	Occupation (check all that Church or ministry position Not a church or ministry p	on [] full] full	time [] part time [] part	time time
18.	How did you learn of Lu	ther Rice Co	ollege and	d Seminary?	
	[] Pastor Referral		[] I		
	[] Conference		[] F	Radio/Magazine	
	[] Alumni Referral		[] (Other	
			F	Please Specify	
19.	Do you understand wh	at it means	to receiv	ve eternal life?	Yes No
20.	Have you trusted Jesus	s Christ as	your pei	rsonal Savior?	_ Yes No

Please attach a short statement describing your conversion experience. Include what a person must believe and do to receive eternal life and when you took that step.

APPLICANT'S AGREEMENT

(Circle your answers)

- YES NO I have carefully read the "Standards of Conduct," and I agree to adhere to these completely as long as I am an active student at Luther Rice College and Seminary.
- YES NO I have carefully read the "Financial Policy," and I agree to abide by all the policies set forth therein.
- YES NO I have carefully read Luther Rice's "Doctrinal Statement," and I affirm my belief in each of the articles and agree to respect the entire doctrinal statement.
- **YES NO** I have carefully read, understand, and will respect the institution's mission, philosophy, outcomes, and position statements.
- YES NO I have carefully read the Luther Rice College and Seminary Privacy Policy, and I understand and will respect the School's policies and procedures associated with handling sensitive personal information and data.
- YES NO I certify that to the best of my knowledge, all of the answers and statements in this application are true and give an accurate and adequate account of my background and beliefs.

Signature	Date

Admission to Luther Rice College and Seminary will not be granted unless the applicant can answer "Yes" to all six affirmations, the "Applicant's Agreement" is signed, the Application fee is included, all application documents are submitted, and is approved by the Office of Admissions and Records.

APPLICATION PROCESS

- 1. Apply online at www.LutherRice.edu/apply or submit the application found at the back of this catalog with appropriate fee.
- 2. Transcripts from foreign institutions will be evaluated by Luther Rice. In the event the transcript cannot be evaluated by Luther Rice, the applicant will be required to submit their transcript to a third party agency for a determination of U.S. equivalency. The agency used must be approved/certified by either The National Association of Credential Evaluation Services (NACES) or The Association of Credential Evaluators (AICE). Agencies will charge a fee for their services and is payable by the applicant.

Luther Rice requires official transcripts for admission. Students who need an official transcript sent to Luther Rice may send it electronically to Transcripts@LutherRice.edu or by mail to Luther Rice College & Seminary, Attn: Admissions, 3038 Evans Mill Rd., Lithonia, GA 30038. Transcripts must be received directly from an institution to be considered official. *

- 3. Have the completed Christian character reference form sent to Luther Rice.
- 4. Doctoral students have additional requirements for admission (see p. 11).

All required admissions documents must be received before a transcript review and course recommendations are possible.

LUTHER RICE COLLEGE AND SEMINARY

3038 Evans Mill Road Lithonia, Georgia 30038 (770) 484-1204 www.LutherRice.edu

CHRISTIAN CHARACTER REFERENCE

TO THE APPLICANT:

This questionnaire is to be completed by a pastor or church leader who is not a relative.

APPLICAN	NT INFO	ORMATION		
_	Dr.			
Name of	Rev.			
Applicant:				
	Miss	Last	First	M.I.
	Mrs.			
Address of	Applicar	it:		
TO THE R	EFERE	NCE PROVIDE	R:	
tial. Please Luther Rice	mail this e College an also be	s form directly t and Seminary, 3	attention and will be to the Office of Admi 3038 Evans Mill Roa 770-484-1155 or by er	ssions and Records, d, Lithonia, Georgia
			O THE STUDENT. LUTHER RICE ADM	IISSIONS OFFICE.
1. How well	do you k	know the applican	nt? [] casually	[] fairly well
[] quite	well	How long?	years.	
			the applicant made a p	personal profession of nown
3. To what 6	extent ha	s the applicant p	articipated in the acti	vities of the church?
4 I	4:4:	441	1.0	
4. In your es	stimation,		int exert a good influe se explain.	nce on his/her peers?

5. Are you aware of any personality traits wh ships with others? [] Yes [] No If yes, please explain.	ich hinder the applicant in relation-
6. Please comment on any special circumsta might prove helpful in considering the appl	
7. Please circle your recommendation of the Rice College and Seminary:	applicant for admission to Luther
Highly recommended	Recommended
* Recommended with reservations	* Not Recommended
* Please indicate the reason(s) for this reco	mmendation on a separate sheet.
Print Name:	Date:
Signature:	
Church:	Position:
Address: Street or P.O. Box	
Street or P.O. Box	
City	State Zip
Web Address:	
Phone number where you can be reached from	n 9 AM - 4 PM :
()	
Email Address:	

DO NOT GIVE THIS FORM BACK TO THE STUDENT. SEND IT DIRECTLY TO THE LUTHER RICE ADMISSIONS OFFICE.

Applicant: Please photocopy this form, complete it (including signature), and send it to your high school and to each college, university, seminary, or institutions of higher learning you have attended.

Official Transcript Request

To: Office of A	Admissions and Records	
Name of H	ligh School, College, or Seminary	
City	State	Zip
Please forward one	(1) official copy of my transcript to:	
	Office of Admissions and Record Luther Rice College and Semina 3038 Evans Mill Road Lithonia, GA 30038	
Student's name		
Maiden or previous	name(s)	
Social Security Nun	nber	
Branch or campus a	ttended	
Date first attended _	Date last attended	·
Degree(s) Received		
Enclosed is \$	for cost of transcript.	
Signature o	of Student	Date
	Street Address	
City	State	Zip
Luther Rice Coll	lege and Seminary * Office of Admis	sions and Records

Luther Rice College and Seminary * Office of Admissions and Records 3038 Evans Mill Road * Lithonia, GA 30038 * 1-800-442-1577

For specific information or questions you might have, please use our phone and email contacts below.

Luther Rice College and Seminary 3038 Evans Mill Road Lithonia, GA 30038

Phone/Fax

General Information	770-484-1204	Local
	1-800-442-1577	Toll Free
General Fax	770-484-1155	
Finance Office Fax	678-990-5388	

AAO@LutherRice.edu
Admissions@LutherRice.edu
Registrar@LutherRice.edu
Studentaccounts@LutherRice.edu
Financialaid@LutherRice.edu
Library@LutherRice.edu
Studentservices@LutherRice.edu
KC.Kuffrey@LutherRice.edu
Alumni@LutherRice.edu
Infotech@LutherRice.edu

Follow us: www.facebook.com/SeminaryOnline www.twitter.com/Luther Rice www.linkedin.com (Join us at the group

Luther Rice College & Seminary)

Contact the Office of Admissions and Records for enrollment information at 1-800-442-1577 or Admissions@LutherRice.edu.

Are you juggling life, work, family, and ministry?

We'll meet you right where you are!