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| **SEMINARI****THEOLOJI****MALAYSIA** |  | Attach recentphotograph (passport size) |
| (an interdenominational theological seminary for clergy and church workers)Lot 3011, Taman South East, 70100 Seremban, Negeri Sembilan D.K., West Malaysia.P.O. Box 175, 70720 Seremban, Negeri Sembilan D.K. West Malaysia.Tel: 606-6322815Email: eng-academic@stm2.edu.my Website: [www.stm.edu.my](http://www.stm.edu.my)**Application for Admission****(**In Campus programme**)****To which Christian studies are you seeking admission? Check one only ☑** |
| * **Master of Divinity**
* **Master of Christian Studies**
* **Graduate Diploma of Christian Studies**
* **Bachelor of Divinity**
* **Diploma of Theology**
* **Bachelor of Theology**
* **Diploma of Christian Ministry**
 |  | **FOR OFFICIAL USE ONLY:** |

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| --- | --- | --- |
| When do you plan to enroll? Year: |  | Language medium: 🗆 English |
| Indicate your anticipated academic load 🗆 Full-time 🗆 Part-time  |
| Have you made any application to other seminary for theological studies? 🗆 Yes 🗆 No |
| If so, which one:  |  |

For those who apply to enroll to programmes of Master of Divinity, Bachelor of Divinity, and Bachelor of Theology:

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| Would you choose to complete your study in a specific area of concentration? 🗆 YES 🗆 NOIf YES, please choose ONE among the following areas of concentration:Biblical Study: 🗆 Old Testament 🗆 New TestamentTheology and History: 🗆 Christian Theology 🗆 Church HistoryPractical Theology: 🗆 Pastoral Care and Ministry 🗆 Missiology 🗆 Christian Spirituality and Worship*Note: Area of concentration will be specified in the Certificate and Transcript upon completion of study.*  |

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| **PERSONAL INFORMATION** |  |

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| --- | --- | --- |
| Name in Full: |  | 🗆 Male 🗆 Female |
|  | According to your I/C & underline your SURNAME or FAMILY NAME |  |
| Name in Chinese (if applicable): |  |

|  |  |
| --- | --- |
| Correspondence address: |  |
|  |
| Postcode:  |
| Home Phone No: |  | Work Phone No: |  |
| Mobile Phone No: |  | Facsimile No: |  |
| Email Address: |  |

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| **Permanent address** (if the above address is temporary, please include your permanent address for future correspondence: |
|  |
| Postcode:  |
| Date of Birth: |  | Citizenship: |  |
| NRIC / Passport No: |  |  Race: |  |

**MARITAL & FAMILY DETAILS:**

|  |  |  |  |
| --- | --- | --- | --- |
| Single: 🗆 |  | Married: 🗆 | Date |
| Widowed: 🗆 | Date | Divorced: 🗆 | Date |
| Spouse’s name: |  | Date of birth: |  |

**NAMES OF CHILDREN & THEIR DATE OF BIRTH**

|  |  |  |
| --- | --- | --- |
| 1. |  | 4. |
| 2. |  | 5. |
| 3. |  | 6. |

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| **CHURCH AFFILIATION AND CHRISTIAN EXPERIENCE** |  |
| Denomination: |  |
| Name and address of your present local church:  |  |
| Postcode:  |
| Date and place of baptism:  |  |
| Date and place of confirmation: |  |
| Are your family members Christians? |  |
| Vocational goal (Parish minister, missionary, teacher, chaplain, etc |  |
| If you are making a career change, what is your present vocation? |  |
| Give details of your involvement in your local church and other Christian groups since becoming a Christian |
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| How much time do you spend in Bible reading and prayer? |  |
| What Christian books have you read in the last three years that you have found particularly helpful? |
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* Testimony: Describe briefly in about 200 – 300 words how and when you became a Christian. (Please use a separate sheet of paper)
* Calling Ministry: Write a short essay of approximately 200 – 300 words explaining why you are applying to come to STM. If you are married, include in your statement how your spouse feels about your application and your entering the Christian ministry. If you are under 21 years of age, how do your parents feel about your application? (Please use a separate sheet of paper)

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| **ACADEMIC HISTORY** |  |

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| --- | --- | --- | --- | --- |
| **Name & Type of Institution:****State, Country** | **Mode of Study: Language of Instruction** | **From ( YYYY/MM)** | **To ( YYYY/MM)** | **Type of Qualification:****Grade Obtain** |
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| **EMPLOYMENT HISTORY** |  |

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| --- | --- | --- | --- |
| **Company Name:** **Employment Type, State, Country** | **Position: Responsibilities** | **From ( YYYY/MM/DATE)** | **To ( YYYY/MM/DATE)** |
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| **FINANCIAL INFORMATION** |  |
| How will your training in the Seminary be financed? |
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|  |
| It you are a married student how will your own family be supported during the period of training? |
|  |
| Are your parents depending on you for financial support? If so, what is your arrangement? |

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| **SUPPORTING DOCUMENTS** |  |

**This application will not be valid unless supported by certified copies of the original documents.**

**FOR ALL APPLICANTS**

1. Photocopy of your NRIC (for Malaysian students) or passport (for international students)
2. Certified documentary evidence of examinations passed (certificates and transcripts). Copy of MUET results (if available) to be included
3. A medical certificate of health from a qualified doctor and a X-Ray report
4. A recommendation letter from your pastor / elder
5. A recommendation letter from someone other than a family member or relative
6. A recommendation letter from your denomination ministerial / ordination committee or head of denomination

*(applicable to church sponsored students only)*

1. Three (3) passport size photographs
2. A self-report questionnaire form
3. Cost for submission of application RM240.00 (for non-STM affiliated church sponsored) payable to **“Pemegang Amanah Seminari Theoloji Malaysia Berdaftar”***.*



(Application deadline: Before **1 October** for admission into the following academic year)

**FOR PART-TIME STUDENTS**

* Applicants need only submit the following documents listed:

Items a, b, d, g, h & i.

***\*STM Privacy and Personal Data Protection Policy****STM is committed to protecting the privacy, confidentiality, and security of all personal data to which it is entrusted in line with the PDPA Act 2010 & PDPA Amendment Act 2024. All information provided in the above will not be published or shared with any unauthorized person(s).*

*For further detail of STM’s Privacy and Personal Data Protection Policy, you can find it at -
English: STM Privacy and Personal Data Protection Policy |
English:* [*https://stm.edu.my/policies/stms-privacy-policy/*](https://stm.edu.my/policies/stms-privacy-policy/)

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| I declare that the above information contained herein is true and accurate. If admitted, I agree to abide by the standards of conduct of Seminari Theoloji Malaysia as they are stated in the current Student’s Handbook.Signature: Date: |
|  |  |  |  |  |

**Private & Confidential**

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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Please submit together with an application form (Tick the appropriate box).

**SELF REPORTING QUESTIONNAIRE (SRQ)**

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| --- | --- | --- | --- |
| **Question** | **Yes** | **No** | **Sometimes** |
| 1] Do you often have headaches? |  |  |  |
| 2] Is your appetite / digestion poor? |  |  |  |
| 3] Do you sleep badly? |  |  |  |
| 4] Are you easily frightened? |  |  |  |
| 5] Are you easily tired? |  |  |  |
| 6] Do you feel nervous, tense or worried? |  |  |  |
| 7] Do you have a chronic illness (long term)? Please specify: |  |  |  |
| 8] Do you have a smoking problem? |  |  |  |
| 9] Do you have an addiction (substance abuse, online games/ web  addiction)? Please specify: |  |  |  |
| 10] Do you cry more than usual? |  |  |  |
| 11] Do you often feel unhappy? |  |  |  |
| 12] Do you find it difficult to make a decision? |  |  |  |
| 13] Do you suffer from depression? |  |  |  |
| 14] Are you under any medication for depression? |  |  |  |
| 15] Can you handle pressure well? |  |  |  |
| 16] Do you procrastinate? |  |  |  |
| 17] Have you ever entertain the thought of ending your life? |  |  |  |
| 18] Do you feel your life is not worth living? |  |  |  |
| 19] Are you a team player? |  |  |  |
| 20] Can you relate well with other people? |  |  |  |
| 21] Do you feel that somebody has been trying to harm you in some way? |  |  |  |
| 22] Do you think too highly of yourself? |  |  |  |
| 23] Do you have trouble thinking clearly? |  |  |  |
| 24] Do you ever hear voices without knowing where they come from or which other people cannot hear? |  |  |  |
| 25] Is there any other thing that you wish to tell us? Please specify:  |  |  |  |