



Application to Register as a Postgraduate Student (University of Exeter PhD in Theology / Hartford Seminary International PhD Program)

Please refer to the attached Notes on Application Procedure

1. PROPOSED PROGRAMME DETAILS			
Title of Programme	PhD	Code	A143H
Proposed Start Date	<input type="text"/>	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
Proposed Area of Research:	Theology and Religious Studies (Hartford Seminary International PhD Program)		

2. PERSONAL DETAILS			
Last Name/Family Name	<input type="text"/>	Title	<input type="text"/>
First/Given Name(s)	<input type="text"/>	Date of Birth	<input type="text" value="DD/MM/YY"/>
Previous Last Name (if changed)	<input type="text"/>		
Permanent Address		Temporary Address (if applicable) for correspondence	
<input type="text"/>		<input type="text"/>	
		Dates at this address: From To	
Telephone Day	<input type="text"/>	Telephone Day	<input type="text"/>
Telephone Evening	<input type="text"/>	Telephone Evening	<input type="text"/>
Fax	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>

3. NON-U.S. CITIZENS OR U.S. PERMANENT RESIDENTS ONLY	
Nationality	Country of Birth
<input type="text"/>	<input type="text"/>

Country of Permanent Residence	<input style="width: 95%;" type="text"/>	Office Use Only
Fees:	Special Hartford Seminary Rate	Fee Status <input style="width: 50%;" type="text"/>
Proposed source of finance	<input style="width: 95%;" type="text"/>	

4. ACADEMIC QUALIFICATIONS (Only include degree level or equivalent)

This section must be completed even if you attach a separate Curriculum Vitae. Please note that official copies of all transcripts must be sent directly to the Hartford Seminary Continue on a separate sheet if necessary.

Full Name of Institution	Dates of Attendance (from/to)	Type of Qualification (eg BA (Hons))	Major / Areas Studied	Grade Point Average (GPA) / Current %	Award Date

5. PROFESSIONAL QUALIFICATIONS

This section must be completed even if you attach a separate CV. Please include copies of certificates. Continue on a separate sheet if necessary.

Awarding Body	Qualification	Area of Studies	Average grades, if relevant	Award Date

6. WORK EXPERIENCE (where relevant)

Continue on a separate sheet if necessary.

Dates of Employment	Name of Employer	Brief description of work and responsibility

7. ENGLISH LANGUAGE

If English is not your first language, any offer of a place may be conditional on proof of proficiency in English. If you have taken a test of English Language, please supply the information below and enclose certificates where available.

Test Taken & Score <input style="width: 95%;" type="text"/>	Date <input style="width: 95%;" type="text"/>
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8. REMOTE STUDIES

Do you intend to be ordinarily resident in a location remote from the University of Exeter campuses during periods of your study?

YES

Proposed location of remote studies

Hartford Seminary

For what periods would you be available to attend the University of Exeter?

One term 'Exeter residential experience'

9. THESIS

It is expected that all student's applying for the International Ph.D. Program will have completed a Master's Level Thesis.

Have you completed a Master's level thesis? Yes No If yes, please enclose a copy of your thesis with this application.

10. RESEARCH PROPOSAL/PERSONAL STATEMENT

Please enclose a single-spaced typewritten statement reflecting on the following areas. The statement should be no more than four pages long. *Please do NOT staple personal statements.*

A. Please clearly state the topic area you wish to pursue in your dissertation. Your research proposal should cover as concisely as possible preliminary ideas of your research area, indicating the general area of study, objectives and hypotheses, methodology, sources of data, etc.

B. Your goals in seeking a Doctor of Philosophy degree and the personal experiences which have led you to make this decision, and a description of any previous research experience. Please include the reason(s) you have chosen the International PhD Program and your expectations for the program.

C. Any other relevant information to support your application.

11. REFERENCES: Please enclose three academic references and give names and addresses of your referees below.

Referee 1

Referee 2

Referee 3

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Telephone

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Telephone

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Telephone

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Fax

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Fax

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Fax

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Email

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Email

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Email

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12. Please indicate how you found out about the postgraduate programme for which you are applying.

Prospectus

Colleague/friend

Website

Advertisement – Please state

Other – Please state

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Please indicate which other universities/institutions you have applied to

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13. DATA PROTECTION ACT

The University of Exeter requires the information on this form for Education purposes and your personal data will be processed in accordance with the University's registration and current data protection legislation.

14. DECLARATION

Criminal Convictions

The University is required under the provisions of the Rehabilitation of Offenders Act 1974 to require you to state whether or not you have any criminal convictions, excluding motoring offences. If you indicate "YES" you may be required to provide details to the University.

YES / NO

I confirm that the particulars given in this form are to the best of my knowledge and belief correct, and that, if admitted to the University, I shall abide by the Statutes, Ordinances and Regulations of the University.

Applicant's signature

Date

Please return to: Hartford Seminary, Admissions Office, 77 Sherman Street, Hartford, Connecticut, 06105 United States.

Equal Opportunities Monitoring

The questions in the following section are requested by the University of Exeter and are optional. However you are encouraged to complete this section as the information is collected for statistical purposes and enables the University to monitor the effectiveness of its equal opportunities policies. The information provided will be treated as STRICTLY CONFIDENTIAL and WILL NOT be taken into consideration in the admissions decision.

1. GENDER

Are you: Male Female

2. SPECIAL NEEDS

Please tick the appropriate box if you have a physical or sensory disability which might in some way affect your studies or may require special facilities or treatment. This information may be used to make appropriate arrangements to support your studies.

00	No disability	<input type="checkbox"/>	04	Wheelchair user/mobility difficulties	<input type="checkbox"/>	08	Multiple disabilities	<input type="checkbox"/>
01	Dyslexia	<input type="checkbox"/>	05	Personal Care Support	<input type="checkbox"/>	09	A disability not listed above	<input type="checkbox"/>
02	Blind/Partially sighted	<input type="checkbox"/>	06	Mental Health difficulties	<input type="checkbox"/>			
03	Deaf/Hearing impaired	<input type="checkbox"/>	07	Unseen disability	<input type="checkbox"/>			