

This application is only for readmission to the degree program to which the student was previously admitted. Students who wish to enter a different degree program must complete the Master's Application for Admission.

GUIDELINES & POLICIES

1. A student who has not completed a course at Western Seminary for three consecutive semesters (i.e. one full year) or more without prior written approval of the Dean of Student Development/Registrar will be considered withdrawn from Western Seminary and must reapply before resuming his/her studies.
2. Filing this reapplication form and/or any other reapplication materials does not guarantee readmission to Western Seminary. The student must demonstrate that she/he still meets the admission standards for the given degree program.
3. Students who were not approved for a Leave of Absence will be held accountable to the catalog requirements at the time of readmission, rather than the time of initial admission.

NON-DEGREE STATUS STUDENTS

The following shall be submitted: 1. Application for Readmission.

MASTER OF ARTS, MASTER OF DIVINITY, MASTER OF THEOLOGY, GRADUATE STUDIES CERTIFICATE & DIPLOMA STUDENTS NOT ENROLLED FOR 3 SEMESTERS

The following shall be submitted: 1. Application for Readmission; 2. One pastoral reference.

MASTER OF ARTS, MASTER OF DIVINITY, MASTER OF THEOLOGY, GRADUATE STUDIES CERTIFICATE & DIPLOMA STUDENTS NOT ENROLLED FOR 4-5 SEMESTERS

The following shall be submitted: 1. Application for Readmission; 2. One pastoral reference; 3. One additional reference.

MASTER OF ARTS, MASTER OF DIVINITY, MASTER OF THEOLOGY, GRADUATE STUDIES CERTIFICATE & DIPLOMA STUDENTS NOT ENROLLED FOR 6 SEMESTERS OR MORE

The following shall be submitted: 1. New Application for Admission; 2. Updated Christian experience statement; 3. Three references; 4. Official transcripts of any courses completed since last enrolled at Western Seminary.

DOCTOR OF MINISTRY OR DOCTOR OF MISSIOLOGY STUDENTS

- Doctor of Ministry students contact D.Min. Coordinator Sara Pirolo at 877.517.1800 ext. 1868 or 503.517.1868, or spirolo@westernseminary.edu.
- Doctor of Missiology students contact D.Miss. Coordinator Joy Oelfke at 877.517.1800 ext. 1904 or 503.517.1904, or joy@westernseminary.edu.

Application for Readmission

Full Name _____ Student ID _____
First Middle Last

Address _____ City _____

State _____ Zip _____ Home Phone () _____

Work Phone () _____ Cell Phone () _____

Email _____ SSN _____ Date of Birth _____

Spouse Name _____ Anticipated Semester of Re-Enrollment _____

Degree Program _____ Campus Location _____

Present Church Membership _____ Source of Income _____

STATEMENT OF FAITH, WORLD EVANGELICAL ALLIANCE

We believe...in the Holy Scriptures as originally given by God, divinely inspired, infallible, entirely trustworthy; and the supreme authority in all matters of faith and conduct...One God, eternally existent in three persons, Father, Son, and Holy Spirit...Our Lord Jesus Christ, God manifest in the flesh, His virgin birth, His sinless human life, His divine miracles, His vicarious and atoning death, His bodily resurrection, His ascension, His mediatorial work, and His personal return in power and glory...The Salvation of lost and sinful man through the shed blood of the Lord Jesus Christ by faith apart from works, and regeneration by the Holy Spirit...The Holy Spirit, by whose indwelling the believer is enabled to live a holy life, to witness and work for the Lord Jesus Christ...The Unity of the Spirit of all true believers, the Church, the Body of Christ...The Resurrection of both the saved and the lost; they that are saved unto the resurrection of life, they that are lost unto the resurrection of damnation.

I fully agree with all elements of the Statement of Faith printed above.

PLEASE RESPOND TO THE FOLLOWING ON A SEPARATE PAGE.

1. Why did you withdraw from Western Seminary?
2. Why do you wish to return at this time?
3. Please describe your employment and ministry experiences since you were last enrolled.
4. Have you completed any coursework at another educational institution since you were last enrolled?

I have read and understood the guidelines and policies for readmission on the reverse side of this form.

Signature _____ Date _____

PORTLAND CAMPUS

Attn: Kristin Gibb
5511 SE Hawthorne Blvd
Portland, OR 97215-3367
(877) 517-1800 or (503) 517-1800
(503) 517-1801 fax

SAN JOSE CAMPUS

Attn: Carrie Priest
16330 Los Gatos Blvd, Ste. 100
Los Gatos, CA 95032-4520
(877) 900-6889 or (408) 356-6889
(408) 358-2907 fax

SACRAMENTO CAMPUS

Attn: Janet Gluck
2924 Becerra Way
Sacramento, CA 95821
(800) 250-7030 or (916) 488-3720
(916) 488-3735 fax

OFFICE USE ONLY

Approve _____ Disapprove _____ Advisor _____ Registrar _____ Date _____

Comments/Provisions _____