

Dear Seminarian:

We very are glad to know of your plans to re-enroll at the Samuel Dewitt Proctor School of Theology at Virginia Union University. Everything that you need for the readmissions process is attached.

- <u>Two recommendations</u> 1 Pastoral and 1- Personal (form enclosed) Have your respondents to return the recommendations to you in sealed and flap signed envelopes for your submission to us.
- A non-refundable <u>readmission application fee of \$25.00</u>, payable to the "Samuel DeWitt Proctor School of Theology"
- A <u>written update of your activities</u> since your last enrollment (form enclosed)
- Application for Readmission

If you have attended any schools since your last enrollment at STVU, please submit official transcripts of your work. All of the requested documentation should be together to:

Graduate Enrollment Services
Virginia Union University – STVU
1500 N. Lombardy Street
Richmond, VA 23220

Thank you for your continued interest in STVU. We look forward to your return.

Very truly yours,

Denise G. Coleman

Denise G. Coleman,

Coordinator Graduate Enrollment Services

# Readmission Application Virginia Union University Samuel Dewitt Proctor School of Theology

Please submit the following with this application:

- \$25.00 non-refundable application fee, made payable to "The Samuel DeWitt Proctor School of Theology"
- Readmission Activity Update Form Readmission Activity Update Form (enclosed)
- Two references in flap-signed and sealed envelopes; one should be a Pastoral reference and the 2<sup>nd</sup> can be a Personal reference.
- Please duplicate the enclosed reference form. Have respondent to return to you for submission to us.

| Were you previously en | <i>wolled in the</i> Chris | stian Education Specialty?                             | $\square Yes \square No$            |               |
|------------------------|----------------------------|--|-------------------------------------|---------------|
| Program of Intent: (   | (Check one)                | DIV MACE DM  | IN                                  |               |
| Did you graduate from  | n STVU? □Yes               | □No If yes, what year?                                 | ?                                   |               |
| Re-Admission: Term     | and Year: □Fall            | ☐Winter ☐Spring  | <b>□</b> Summer 20                  |               |
| Please complete the fo | llowing:                   |  |                                     |               |
| SSN:                   |                            | VUU ID #:  |                                     |               |
| Name                   |                            |  |                                     |               |
| (Las                   | t)                         | (First)  | (Middle)                            |               |
|                        |                            |  |                                     |               |
|                        |                            |  |                                     |               |
| Home Phone # (         | )                          | Cell Ph  | one # ( )                           |               |
| Work Phone # (         | )                          |  |                                     |               |
| E-mail Address:        |                            |  |                                     |               |
|                        |                            |  | VISA Status                         |               |
| Date of Last Enroll    | nent at STVU (M            | Ionth/Year)  |                                     |               |
| Please list below sch  | ools you have att          | ended since your last en                               | rollment at STVU, if none           | , state none: |
| <u>Name</u>            | <b>Location</b>            | Dates/Attended   | Degree Rec'd                        | <u>Year</u>   |
|                        |                            |  |                                     |               |
| •                      |                            | or are you currently on p<br>in on a separate sheet of | robation from any other s<br>paper. | school?       |
| Present Church Me      | mbership                   |  |                                     |               |
| Church Address:        |                            |  |                                     |               |

## ${\bf List\ Your\ Religious\ Denomination:}\ ({\bf See\ choices\ below}):$

| (Signature)  |                                  | (Date)                              |
|--|----------------------------------|-------------------------------------|
| As a matter of policy, we do not di sex, national origin, or handicap. |                                  |                                     |
| List the name, address, telephon emergency.                            | e number and relationship of a p | person to contact in case of an     |
| If yes, provide the name and add                                       | lress of Church:                 |                                     |
| Name and Address of Pastor  Are you currently pastoring a ch           |                                  |                                     |
| ISLM-Islam   | PBPT-Progressive Baptist         |                                     |
| HOLI-Holiness  | P-Personal                       | WESL-Wesleyan                       |
| EPIS-Episcopalian  | OTHR-Other                       | <b>UNMC-United Methodist Church</b> |
| COGI-Church of God in Christ   | NC-Non-Christian                 | UCCH-United Church of Christ        |
| CATH-Catholic CJOG-Church of God                                       | NBPT-National Baptist            | SBPT-Southern Baptist               |
| BAPT-Baptist   | MUSL-Muslim                      | SAMB-Southern Am. Baptist           |
| APOS-Apostolic   | MORA-Mormon                      |                                     |
| African Methodist Episcopal Zion                                       | METH-Methodist                   | RC-Roman Catholic                   |
| AMEZ-  | MENN-Mennonite                   | PROT-Protestant                     |
| AME-African Methodist Episcopal  | LUTH-Lutheran                    | PRES-Presbyterian                   |
| ABPT-American Baptist  | JW-Jehovah's Witness             | PENT-Pentecostal                    |

### Samuel Dewitt Proctor School of Theology Virginia Union University Master of Divinity Degree Program

## **Readmission Activity Update Form**

Please use this form using the back if necessary to give us a written update of your activities since you were last enrolled at STVU.

| Name of Applicant: | VUU ID #: |  |
|--------------------|-----------|--|
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| CION               | DATE      |  |

#### Samuel Dewitt Proctor School of Theology Virginia Union University Master of Divinity Degree Program

#### **Readmission Reference Form**

This former student is applying for readmission. It is our desire to readmit persons of outstanding Christian character and high intellectual ability. As this student has been away from school, we need you to update us as to their emotional stability, leadership ability, other vocational potential, apparent shortcomings, and intellectual competence for ministry. State any known accomplishments and any other information you deem helpful to us evaluate this former student on this page using the back of this form if necessary. Please return to the applicant in a sealed-flap signed envelopes for submission to us. Thank you for your time in this matter.

Name of Applicant:

|     | <br> | DATE |  |
|-----|------|------|--|
|     |      |      |  |
| ESS |      |      |  |
|     | <br> |      |  |

RETURN TO:
GRADUATE ENROLLMENT SERVICES
VIRGINIA UNION UNIVERSITY – STVU
1500 NORTH LOMBARDY STREET, RICHMOND, VA 23220

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