



Application for Admission to Certificate Program

Application Requirements

1. Complete each section of the application form. Please type or print legibly.
2. Submit a personal statement of at least 700 words indicating your reasons for pursuing a certificate in Sacred Scripture, Evangelization & Catechesis, or Catholic Youth Ministry.
3. Request official transcripts from all post-secondary schools attended to be sent directly to the Augustine Institute Admissions Office (**for Graduate Certificate**).
4. Request one confidential letter of recommendation. The recommender should be someone qualified to speak to the applicant's ability to successfully complete the certificate program. It should be sent to the Augustine Institute Admissions Office (using the enclosed cover sheet).

Name & Title _____

5. Enclose a nonrefundable application fee of \$50.00 (check or money order) payable to the Augustine Institute:
 - Fall Admission deadline is July 1st
 - Winter and Spring Admission deadline is December 1st
 - Summer Admission deadline is April 1st
 - Late Admission: Applications postmarked after the deadline will be considered, but must include the late application fee of \$75.00. *Please note: It is recommended that your completed application be returned as soon as possible as applicants will only be reviewed as long as there is sufficient space.*
 - Please note that students taking classes on-campus must pay a non-refundable activity fee at registration and students taking classes through distance education must pay a media fee.

International applicants also must:

1. Submit official TOEFL scores (required of international students whose native language is not English and who have not completed a college degree in the United States).
2. Complete the International Student Questionnaire and Financial Certification Form. (Please note that the Augustine Institute is not eligible to participate in granting student visas)

Personal Information

Name (first, middle, last): _____

Birth Date: _____

Current Mailing Address:

City: _____ State: _____ Postal Code: _____

Country _____

Permanent mailing address (*if different*):

City _____ State _____ Postal Code _____

Country _____

Home Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Religious Affiliation _____

Parish _____

Age _____ Gender _____

Are you a U.S. citizen?

- Yes
 No If not, what is your current visa type?

Semester and year for which you are applying for admission:

Year _____ Fall Winter Spring Summer

Indicate your intended plan of study:

Sacred Scripture:	<input type="checkbox"/> Basic Certificate	<input type="checkbox"/> Graduate Certificate
Catholic Youth Ministry:	<input type="checkbox"/> Basic Certificate	<input type="checkbox"/> Graduate Certificate
Evangelization & Catechesis:	<input type="checkbox"/> Basic Certificate	<input type="checkbox"/> Graduate Certificate

Program in which you intend to take your first course: Distance Education On-Campus

Optional: Ethnic Background of Students

For the Institute to meet its Federal reporting obligation regarding the ethnic background of students, we ask you to complete the following information. This information is for statistical purposes only. No individual will be personally identified in any report of this information. You are not required to provide this information.

Please check the one box that best describes your ethnic origin:

- | | | |
|--|--|-----------------------------------|
| <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Native American or Alaskan Native | <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> Other |

Academic Background

Highest level of education: _____

Please provide information on all institutions of higher learning attended beginning with the most recent.

College <small>(city/state)</small>	Date Attended <small>(mm/yr to mm/yr)</small>	Degree Received or Expected	Major Field(s)	GPA

Please indicate how you first heard about the Augustine Institute.

Professional and Volunteer Experience

List any professional experience as well as past and present employment with dates.

Send All Materials To:

Augustine Institute
Admissions Office
3001 S. Federal Blvd - Box 1126
Denver, CO 80236

Signature

By affixing my signature below, I certify to the best of my knowledge that the information in this application is accurate and complete.

Signature: _____ Date: _____

The Augustine Institute admits students of any race, color, national, or ethnic origin, to all the rights, privileges, programs, and activities generally accorded or made available to students at this school. It does not discriminate on the basis of race, color, national, or ethnic origin in administration of educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

*****If you have any difficulties with the application processes please contact the Admissions Office*****

3001 South Federal Boulevard, Box 1126, Denver, CO 80236
(303) 937-4420, (303) 468-2933 (fax), www.AugustineInstitute.org