

WEST AFRICA THEOLOGICAL SEMINARY
35/37 INTERNATIONAL AIRPORT RD.
P.M.B. 003, MM INT'L AIRPORT
LAGOS, NIGERIA

APPLICATION FOR ADMISSION

NAME

.....

COMPLETE POSTAL ADDRESS.....

DATE OF BIRTH.....SEX: MALE FEMALE

MARITAL STATUS: UNMARRIED MARRIED DIVORCED SEPARATED

NUMBER OF CHILDREN.....AGES OF CHILDREN.....

ARE YOU PLANNING TO COME TO WATS WITH YOUR FAMILY?.....

WHAT LOCAL CHURCH ARE YOU ATTENDING?.....

HOW LONG HAVE YOU BEEN ATTENDING THIS CHURCH?.....

ARE YOU A MEMBER OF THE CHURCH?.....HOW LONG?.....

WHAT ARE YOUR OFFICIAL DUTIES IN THE CHURCH?.....

.....

WHEN WERE YOU CONVERTED?.....GIVE A BRIEF ACCOUNT OF YOUR
CONVERSION:.....

.....

.....

.....

NAME AND COMPLETE POSTAL ADDRESS OF YOUR PASTOR:.....

.....

WILL YOUR PASTOR RECOMMEND YOU TO WEST AFRICA THEOLOGICAL SEMINARY?...

WHAT IS YOUR PURPOSE IN ATTENDING WATS (PREPARATION FOR MINISTRY,
EVANGELISM, MISSIONARY WORK, ETC) CIRCLE ONE.

ARE YOU CALLED OF GOD TO SPECIAL WORK?.....WHAT?.....

YOUR PRESENT OCCUPATION:.....

EMPLOYER'S NAME AND POSTAL ADDRESS:.....

NATURE OF WORK:.....

WHO WILL SPONSOR YOUR STUDY AT WATS? (COMPLETE NAME AND POSTAL
ADDRESS)

WHICH COURSE OF STUDY ARE YOU INTERESTED IN AT WATS

DIPLOMA OF THEOLOGY (TWO YEARS) – MINISTERS WITH G.C.E. (FOUR CREDITS)

B.A. IN THEOLOGY MINISTERS WITH G.C.E. (FIVE CREDITS AND ABOVE
YOUR EDUCATION: PRIMARY, SECONDARY, COLLEGE, UNIVERSITY, ETC.

SCHOOL: ADDRESS: DATES ATTENDED: CERTIFICATES:

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.....
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LIST TWO REFERENCES WHO CAN VOUCH FOR YOUR CHRISTIAN CHARACTER:

1.....
NAME COMPLETE POSTAL ADDRESS

.....
OCCUPATION

2.....
NAME COMPLETE POSTAL ADDRESS

.....
OCCUPATION

HAVE YOU READ THE WATS CATALOG OR BROCHURE CAREFULLY?
ARE YOU IN FULL AGREEMENT WITH THE DOCTRINE, PURPOSE AND PROCESURES OF
WATS AS STATED IN THE CATALOG OR PROSPECTUS?.....

PLEDGE:

I HEREBY AGREE TO CONFORM TO THE STATED RULES AND REGULATIONS OF WEST
AFRICA THEOLOGICAL SEMINARY. I FURTHER AGREE TO ABIDE BY ANY ADDITIONAL
RULES WHICH THE SEMINARY BOARD OR ADMINISTRATIVE COUNCIL MAY FIND IT
NECESSARY TO INSTITUTE THROUGHOUT MY STAY AT WATS

(SIGNED).....

DATE:.....

PASTOR'S ENDORSEMENT:

I AM PERSONALLY IN SUPPORT OF THE APPLICANT'S DESIRES TO ENROLL AS A
STUDENT AT WATS AND I RECOMMEND HIM/HER TO THE SEMINARY AS A STUDENT

(SIGNED).....

DATE:.....

ATTACH COPIES OF SCHOOL CERTIFICATES AND TWO CURRENT PHOTOGRAPHY.
THIS APPLICATION MUST BE SUBMITTED WITH N500.00 APPLICATION FEE TO:

THE REGISTRAR
WEST AFRICA THEOLOGICAL SEMINARY
P.M.B. 003, MM INTERNATIONAL AIRPORT
LAGOS, NIGERIA

TEL: 234-01-452-4793

Email: wats@infoweb.abs.net

WEBSITE: www.watsonline.org