Application Instructions for the South Hamilton, Main Campus

Any matriculated student who wishes to change status from one degree program to another must apply through the Admissions Office.

1. Please write clearly and complete all sections of the application.

2. Please provide a short (no more than 1 page), personal statement of why you want to change your status or pursue a second degree. If you would like to start a second degree prior to graduating, please indicate that this will be a dual degree.

3. Please provide a recommendation from a GCTS faculty member.***
   - If the application is made for admissions to the M.Div. program, a recommendation from a GCTS faculty member and a pastor is required. [Applications for the M.A. or Th.M. degrees require just one recommendation from a GCTS faculty member.]
   - If you are moving from a Special Non-Degree Seeking student to a degree program you must provide a pastoral recommendation and a church endorsement, in addition to the recommendation from a GCTS faculty member.
   - Note: Recommendations are to be sent directly to the Admissions Office, are confidential, and will be destroyed after a decision regarding the change of status has been made.

4. International (F-1) students should notify the International Student Coordinator about any planned changes to their degree programs because updates to their visas will be required.

   No action will be taken until an application is complete. Written notification of the decision will be sent to the applicant and the Registration office.

***Links to our recommendation forms:
   - GCTS Faculty Member Recommendation: http://www.gcts.edu/cosrecommendation
   - Pastoral Recommendation & Church Endorsement: http://www.gcts.edu/recommendation

Please mail, fax, or email your documents to:

Gordon-Conwell Theological Seminary
Attn: Admissions Office
130 Essex Street
South Hamilton, MA 01982
Phone: 800.428.7329
Fax: 978.646.4178
admissions@gordonconwell.edu

* Changing your current degree program.
** Adding a second degree.
Application for Change of Status/Second Degree

ID#: __________________________ GCTS Box #: __________________________

Name: ______________________________________________________________________
   Last First Middle

Address: _____________________________________________________________________

Gordon-Conwell Email Address: ___________________________ Phone Number: __________

Residency/VISA Status: __________________________

Current Degree: __________________________

Are you: (Please check the correct box)

○ Adding a second degree?
○ Changing your current degree?

I wish to add/switch to:

○ Master of Divinity
○ Anglican/Episcopal Concentration
○ Dual Degree: M.Div. and MACO

○ Master of Arts in:
   ○ New Testament
   ○ Old Testament
   ○ Church History
   ○ Theology
   ○ Religion
   ○ Biblical Languages
   ○ World Missions and Evangelism
   ○ Educational Ministries
   ○ Workplace, Theology, Ethics and Leadership
   ○ Ethics and Society
   ○ Spiritual Formation

○ Master of Arts in Counseling:
○ Marriage and Family Therapist
○ Mental Health Counselor
○ Dual: Marriage and Family and Mental Health

○ Dual Degree: M.Div. and MACO
○ Church History
○ Biblical Languages
○ World Missions and Evangelism
○ Educational Ministries
○ Workplace, Theology, Ethics and Leadership
○ Ethics and Society
○ Spiritual Formation

○ Other:
   ○ Official Auditor
   ○ Special (non-degree seeking)

Post-Graduate Programs:

Master of Theology:  ○ Biblical Studies  ○ Christian Thought  ○ Preaching

Desired effective date of new status:

○ Fall Semester, 20___
○ January Semester, 20___
○ Spring Semester, 20___

○ Summer I Semester, 20___
○ Summer II Semester, 20___
○ Summer III Semester, 20___
Application for Change of Status/Second Degree

Personal Statement

In the space below, please type or write clearly (1) the reasons why you are seeking to add a second degree and/or change of degree status and (2) how this change in program to which you are applying will contribute toward your vocational goal.

Permission to release GCTS transcript: By signing here I authorize Gordon-Conwell Theological Seminary to release an unofficial copy of my transcript to the Admissions Office.

Signature: ________________________________ Date: ________________________________
Name (print or type): ____________________________ GCTS ID: ____________________________