



Maranatha Biblical Seminary

Vikas Engineering Collage Road, Nunna - Vijayawada.

Sridhar Anne
Dean of Academics

sri777@hotmail.com
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In the grace and peace of Christ, I warmly welcome you to Maranatha Biblical Seminary Vijayawada.

I am happy that you are considering Maranatha to spend three years preparing for ministry, or you may wish to study further hereafter. Perhaps you would like to teach on the faculty in another Bible College or take a position on the staff in different ministries or go abroad to pursue further avenues, and it all starts with this three years B.Th (Bachelor of Theology) course.

I invite you to explore the Bible, learn history with their backgrounds, challenge your faith apologetically, and sharpen your theological beliefs. Maranatha is a lively, growing, richly textured community of learning and prayer. Here at Maranatha, we seek to form mature, wise, and creative Christian leaders to participate in God's reconciling mission in the world. We do this through sustained attention to the Christian tradition under the guidance of intelligent and wise faculty. We share this enterprise with students who become colleagues and leaders with us in ministry.

Please come to discover this community of friends in Christ. And if you do join us, know that you will make a difference here. You will add to our colorful conversation and bring unique gifts to our projects and our celebrations. Having you be part of us will make us better, more faithful, and will contribute to transforming us.

May God look generously upon your exploration and bless you in your discovery. I look forward to meeting you and greeting you personally.

Yours faithfully,

Sridhar Anne



Maranatha Biblical Seminary

Vikas Engineering Collage Road, Nunna - Vijayawada.

mvpvja8@gmail.com, ph: 96427 93777

Attention required

*Below is your application to complete, please read this application completely before you start filling it. If you have any doubts filling it, please make a xerox copy first and try it. Remeber these things, check each box after completing it, it is your **checklist**.*

Checklist:

1. Complete page 1&2 (*student has to fill this application with his/her own handwriting*)
2. Attach your statement of faith (*8th Question or Testimony on a separate sheet*)
3. Attach all your previous education certificate copies & Aadhar copies. (**Bring Originals for verification**)
4. Academic Reference form (*This can be filled by your teacher former or present*)
5. General Reference (*This can be filled by your spiritual guide, elders or your closed one but not by family members*)
6. Pastoral Reference form by your pastors only.

All resident students need to bring these things:

1. Bring your own bedding (not beds but pillow and mattress etc.)
2. Utensils (dining plate, glass etc.)
3. Health & Hygiene (soaps, shampoo such as)
4. Bring your suitcase to lock your things and money, you're responsible for your own things.“

Tuition:

Please read and understand the fee structure, we're not charging for your boarding and food they are free of cost. But the Accreditation fee, documentation, and dress code fee have to be paid by you.

1. Application - 200
2. Registration - 1000
3. Uniform Dress - 1000
4. Monthly Fee for B.Th - 1000.

* We do have scholarships but they're very limited in number, not for everyone. If you want one? then Pray! You will know these rules when you're here in the campus.

Note: Please contact for interview dates, it is June every year. If you have any difficulties please contact us before the date.

* For application queries please call

Registrar: C Babu Boddupalli - 96427 93777

* For Campus address queries please call

Dean of Students: Nirmala Devineni 9441308156

From Bus station:

Bus numbers are **48, 208, 212, 308.**

State Bank of India,

Vikas Engineering college road, **Nunna.**

From Railway station:

Go to bus station, catch above bus numbers.



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1 . Biographical Information

Full Name in Capitals (as per DOB)

.....
First Middle/Maiden Last

Address

Street Name

.....

City

State/Province

Zip code

Land/Mobile

Mobile

Gender : Male Female Date of Birth

DD/MM/YYYY

Aadhar No

Marital Status : Single Married Widowed Seperated Divorced

2. Personal Information

Family :

Name of the Spouse Name & Age of Childern

Statement of Support

Do you have a financial plan to find the costs of your education? Yes No

Yes

No

Does your church offer any additional level of support? Yes No

Yes

No

Are your parents paying your tuition? Yes No

Yes

No

Is there any personal / family situation which may interfere to your education here?

Yes

No

**If yes, please attach a written statement explaining the situation*

Are there any personal challenges and health problems? Yes No

Yes

No

3. Emergency Contact:

This information provided below is used throughout the studies at MBS

Note: If phone number changed, it is your responsibility to update in the office.

Name: Relationship to applicant:

Telephone number: email:

Mailing address:

.....

4. Academics

Please select your highest level of Academic achievement

- 10th/ Certificate Intermediate Bachelor Degree
- Master Degree Doctoral Degree

Previous Education

1.

Name of the School/ College	City	State
.....		
Years attended	Degree earned	

2.

Name of the School/ College	City	State
.....		
Years attended	Degree earned	

3.

Name of the School/ College	City	State
.....		
Years attended	Degree earned	

5. Church Information:

Name of the church:

Denomination:

Address:

.....Telephone Number:

Name of the Pastor:

6. Applicant Influence:

- Maranatha Alumni / Current Student
- Pastor
- Television / Paper / Magazine / Ads
- Meetings / Preacher / Known friends as Pastors

Have you ever been charged with a misdemeanour felony offence?
 This would include any appearance in court for any misdemeanour felony acusation regardless of dismissal or conviction Yes No

If yes, please discuss the circumstances surrounding this incident/ events and the decision of the court on a seperate sheet, discuss with the Academic Dean or Director.

7. Statement and signature:

MBS prohibits discrimination on the basis of race, colour, caste, gender, age, disability. The college maintains its Christian character, but does not discriminate on the basis of religion, except to the extent that applicable law respects its right to act furtherance of its religious objective.

8. Statement of Faith / Testimony

Signature

Date

ACADEMIC REFERENCE

INSTRUCTIONS TO THE APPLICANT: *Please complete the section of this form before distributing the form.*

Name of applicant (please print):

has applied for admission to the program.

You may waive your right to access these rewards and recommendations either by indicating that preference below or by leaving the preference below unchecked and omitting the date and signature information. If you prefer not to waive your right to access these rewards and recommendations, mark the appropriate box below and complete the date and signature lines.

- waive my right to review this reference.
- I do not waive my right to review this reference.
- I grant permission for contact.
- I do not grant permission for contact.

Applicant's Signature: Date:

INSTRUCTIONS TO THE REFERENCE: *Please fill in the requested information as you feel qualified. Mail the completed form to the address. Thankyou for your part in this important phase of the applicant's life.*

How long have you known the applicant?

In what capacity and how well have you known the applicant?.....

What are the applicant's strengths and personal abilities?

List areas in which you feel the applicant may need help as a student.

(Continued on other side)

A C A D E M I C R E F E R E N C E

Below are several characteristics that could affect the applicant's success in graduate studies and his or her subsequent career. Please evaluate the applicant, indicating your degree of support in each area by checking the box to the right of each characteristic listed.

	Not Observed	Weak (Lower 25%)	Fair (Middle 50%)	Good (Top 25%)	Excellent (Top 10%)	Outstanding (Top 2%)
A. Academic aptitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Research ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Writing ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Promptness in completing assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Class attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Moral integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Compatibility with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Ability to accept criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Compared with : (Please indicate reference group: college seniors, first year graduate students, or other.)

I consider this applicant's academic ability to be in the:

- Lowest 25% Middle 50% Upper 25% Upper 10% Upper 1%

Please offer additional comments on the applicant's suitability for graduate studies.

Overall, I recommend this applicant to MARANATHA BIBLICAL SEMINARY

- With highest endorsement. With an above average endorsement.
 With an average endorsement. With the following reservation

.....

- I do not recommend this applicant for admission at this time.

Your name (Please print) Date
 Title Institution
 Address
 Daytime phone
 Signature of reference

GENERAL REFERENCE

INSTRUCTIONS TO THE APPLICANT: *Please complete the section of this form before distributing the form.*

Name of applicant (please print):

has applied for admission to the program.

You may waive your right to access these rewards and recommendations either by indicating that preference below or by leaving the preference below unchecked and omitting the date and signature information. If you prefer not to waive your right to access these rewards and recommendations, mark the appropriate box below and complete the date and signature lines.

- waive my right to review this reference.
- I do not waive my right to review this reference.
- I grant permission for contact.
- I do not grant permission for contact.

Applicant's Signature: Date:

INSTRUCTIONS TO THE REFERENCE: *Please fill in the requested information as you feel qualified. Mail the completed form to the address. Thankyou for your part in this important phase of the applicant's life.*

How long have you known the applicant?

In what capacity and how well have you known the applicant?

What are the applicant's strengths and personal abilities?

List areas in which you feel the applicant may need help as a student.

What is your perception of the applicant's commitment to Christ and to Christian living?

What is your perception of the nature and focus of the applicant's call to Christian service?

(Continued on other side.)

G E N E R A L R E F E R E N C E

Below are several characteristics that could affect the applicant's success in graduate studies and his or her subsequent career. Please evaluate the applicant, indicating your degree of support in each area by checking the box to the right of each characteristic listed.

	Not Observed	Weak (Lower 25%)	Fair (Middle 50%)	Good (Top 25%)	Excellent (Top 10%)	Outstanding (Top 2%)
A. Commitment to Christ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Christian character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Ability to accept criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Academic aptitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Attitude toward others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Interpersonal skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Physical health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M. Marital relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What degree of success in graduate school would you predict for the applicant?

- Below average Average Above average Superior

Please list any reasons why the applicant would be hindered in pursuing a theological degree?

.....

Please offer additional comments on the applicant's abilities for graduate studies.

.....

Overall, I recommend this applicant to **MARANATHA BIBLICAL SEMINARY**.

- With highest endorsement. With an above average endorsement.
 With an average endorsement.
 With the following reservation:

.....

- I do not recommend this applicant for admission at this time.

Your name (Please print)

Title

Address

Daytime phone

Signature of reference

Date

Institution



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PASTORAL REFERENCE

Pastor: Please return this form directly to the Maranatha Biblical Seminary or seal it with signature on the top of the seal and return it to the applicant.

Name of the applicant: has applied for the admission to the program.

You may waive your right to access these rewards and recommendations either by indicating that preference below or by leaving the preference below unchecked and omitting the date and signature information. If you prefer not to waive your right to access these rewards and recommendations, mark the appropriate box below and complete the date and signature lines.

- I waive my right to review this reference
- I do not waive my right to review this reference
(It is also your option of granting permission for a representative of MBS to contact the reference directly concerning this recommendation)
- I grant permission for contact
- I do not grant permission for contact

INSTRUCTIONS TO THE REFERENCE: Please fill in the requested information as you qualified. Mail the completed form to the college. Thankyou for your part in this important phase of the applicants life.

How long have you know the applicant?

In what capacity and how well have you know the applicant? Well Good Average

What are the applicant strengths and abilities?

List areas in which you feel the applicant may need help asa a student

What is your perception of the applicants commitment to Christ and to Christian Living

What is your perception of the nature and focusof the applicants call to christian service?

Signature

Date

P A S T O R A L R E F E R E N C E

Below are several characteristics that could affect the applicant's success in graduate studies and his or her subsequent career. Please evaluate the applicant, indicating your degree of support in each area by checking the box to the right of each characteristic listed.

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G. Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Interpersonal skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Physical health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M. Marital relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Please offer additional comments on the applicant's abilities for graduate studies.

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Overall, I recommend this applicant to MARANATHA BIBLICAL SEMINARY.

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 Title
 Address
 Daytime phone
 Signature of reference
 Date
 Institution



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STUDENT HEALTH FORM

In an effort to ensure students' physical and financial health, Maranatha encourages to take or to have health insurance during the academic year.

** This form should be filled by Medical Doctor only*

Student Name:.....

LAST NAME

FIRST NAME

MIDDLE INITIAL

DATE OF BIRTH

STUDENT ID #

CELL PHONE NUMBER

EXAMINATION

Height

Weight

Female/Male

BP..... Pulse..... Blood Group.....

Urinalysis: Glucose Protein Hemoglobin Hematocrit

Tuberculosis Risk Assessment Circle One: LOW RISK HIGH RISK

ALLERGIES

Allergies (Medications, food, environment, etc.).....

COVID 19

Vaccinated Yes No

If yes provide the certificate / If not get tested

VARICELLA

Positive Varicella IgG Titer (copy of lab report MUST be attached)

Varicella (chicken pox) (physician letter MUST be attached)

SPORTS CLEARANCE

Cleared for all sports without restriction.....

Health Care Provider

Name (please print).....

Address.....

City

State

Zip Code

Phone

email

Signature

Stamp Here:

DISABILITY SERVICES

Students with documented disabilities should register with office at the time of your interview, to ensure their specific academic, residential and/or dining needs will be addressed during their time at Maranatha.