

# COVENANT THEOLOGICAL SEMINARY

PO Box 1177 | Greenville, NC 27835-1177 | Phone: 252-355-2888  
info@covenanttheological.org ~ www.covenanttheological.org

## APPLICATION FOR DEGREE

(Student Version)

I hereby submit this "Application for Degree", whereby the following degree(s) be conferred upon me. I hereby declare that I have fulfilled all requirements of the degree plan, and I am in good academic standing as per all policies and guidelines established WHICH INCLUDES ALL FEES BEING PAID BEFORE GRADUATION.

### STUDENT INFORMATION:

*(Please print or type legibly. Please double-check your information)*

\_\_\_\_\_  
Print student's name as it should appear on degree

\_\_\_\_\_  
Student # and/or Last 4 digits of SS#

\_\_\_\_\_  
Street Address or PO Box

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

### DEGREE INFORMATION:

\_\_\_\_\_  
(Associate, Bachelor, Master, Doctor, PhD)

\_\_\_\_\_  
(Biblical Studies, Theology, Ministry, Divinity  
Christian Education, Christian Counseling)

If receiving a second degree enter that information here:

\_\_\_\_\_  
(Bachelor, Master, Doctor, PhD)

\_\_\_\_\_  
(Biblical Studies, Theology, Ministry, Divinity  
Christian Education, Christian Counseling)

### SCHOOL INFORMATION:

Facilitator: \_\_\_\_\_ School: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE FAX TO: 877-847-9684 or email to [info@covenanttheological.org](mailto:info@covenanttheological.org)**  
**Can also be completed online**