

APPLY FASTER ONLINE AT WWW.LRU.EDU

LUTHER RICE SEMINARY & UNIVERSITY

3038 Evans Mill Road
Lithonia, GA 30038
(770)484-1204
(800)442-1577
(770)484-1155 Fax

10 FOR OFFICE USE ONLY 11

F.O. _____
A.O. _____ [] CR
PROG. _____
HRS. REQ. _____
HRS. TRANS. _____
HRS. THROUGH LRSU _____
E-TEST SCORE _____
ADVISOR _____

DATE _____

S.S.# _____ - _____ - _____

PLEASE CHECK ONE:

- New Applicant
 Reactivation
Please check one:
 Reactivate into the same degree
 Change to a different degree
 Enter a higher degree

NAME OF APPLICANT Dr. _____
Rev. _____
Mr. _____
Mrs. Last First Middle Maiden
Miss _____

MAILING ADDRESS _____
Street or P.O. Box

City State US Zip Code Country

1. Tel. # [home] () _____ [bus.] () _____
[cell] () _____

2. E-mail Address _____
(Required for all new students)

Questions 3-7 are for statistical purposes only. LRSU is an Equal Opportunity higher education institution open to any qualified individual without regard to race, religion, color, national or ethnic origin, or disability. This non-discriminatory policy includes admission policies, scholarship and loan programs, and other school administered programs, except where required by specific religious tenets held by the institution.

3. Date of Birth _____

4. Marital Status single married divorced

5. Gender Male Female

6. **Denomination** ___ Baptist ___ Methodist ___ Presbyterian
 ___ Pentecostal/Charismatic ___ Nondenominational
 ___ Other (please write in) _____

7. **Ethnic Origin** (Check one of the following)
 [] American Indian, Alaska Native [] Hispanic [] Black, non-Hispanic
 [] White, non-Hispanic [] Asian, Pacific Islander [] Non-Resident Alien

8. **Permanent Residence** State _____ Country _____

9. **Are you an F-1 Visa student?** [] Yes [] No

10. **Veteran** [] Yes [] No

11. **Have you ever been convicted of a felony?** [] No [] Yes
 (If yes, please include an explanation with this application.)

12. **Institutions Attended** (list school, city, state)

	Name	Major	Dates Attended	Degree Received	Office Use Only
High School	_____				
College	_____				
Seminary	_____				
Other	_____				

(High School transcript is not necessary for those applying to the Master or Doctoral programs.)

14. Check the degree program for which you are applying

- | | | | |
|---------------------------------|---------|---------------------------------|--------|
| <input type="checkbox"/> B.A.R. | 120 hrs | <input type="checkbox"/> MAL | 36 hrs |
| <input type="checkbox"/> MAA | 36 hrs | <input type="checkbox"/> MABC | 36 hrs |
| <input type="checkbox"/> MACS | 36 hrs | <input type="checkbox"/> M.Div. | 90 hrs |
| <input type="checkbox"/> D.Min. | 30 hrs | | |

15. Bachelor Applicants Only (Check the area of interest to be pursued.)

- Ministry Biblical Counseling Christian Worldview

16. M.Div. Applicants Only (Check the area of interest to be pursued.)

- Ministry Apologetics

17. Doctoral Applicants Only (Check the area of interest to be pursued in your Major Ministry Project.)

- Christian Counseling Ministry Expository Preaching

18. Church Membership

Name of Church _____

Address _____

Web Address _____

Pastor's Name _____

Phone _____

19. Occupation (check all that apply)

- Church or ministry position ____ fulltime ____ part time
Not a church or ministry position ____ fulltime ____ part time

20. How did you learn of Luther Rice Seminary & University? Church ____

Internet ____ Friends or Relatives ____ Radio ____ Magazine Ad ____

Conference ____ Other ____

21. Do you understand what it means to receive eternal life? ____ Yes ____ No

22. Have you trusted Jesus Christ as your personal Savior? ____ Yes ____ No

Please attach a short statement describing your conversion experience. Include what a person must believe and do to receive eternal life and when you took that step.

PAYMENT--If you desire to charge the \$50 application fee on your MasterCard, Visa, or Discover card, please complete the following information.

Account Number _____ 3-digit CVV code _____

Billing Zip Code _____ Exp. date _____

APPLICANT'S AGREEMENT

(Circle your answers)

YES NO I have carefully read the "Standards of Conduct," and I agree to adhere to these completely as long as I am an active student at Luther Rice Seminary & University.

YES NO I have carefully read the "Financial Policy," and I agree to abide by all the policies set forth therein.

YES NO I have carefully read LRSU's "Doctrinal Statement," and I affirm my belief in each of the articles, numbers I through XI and agree to respect the entire doctrinal statement.

YES NO I have carefully read the purpose, philosophy, and objectives, and I understand and will respect the Institution's purpose, philosophy, and objectives.

I certify that to the best of my knowledge, all of the answers and statements in this application are true and give an accurate and adequate account of my background and beliefs.

Signature

Date

Admission to Luther Rice Seminary & University will not be granted unless the applicant can answer "Yes" to all four affirmations, the "Applicant's Agreement" is signed, the Application fee is included, all application documents are submitted, and is approved by the Admissions Committee.

THE ADMISSIONS PROCESS

Step 1: Complete and submit the application in the back of the catalog or preferably online at www.LRU.edu, along with the \$50 application fee.

Step 2: Request all your transcripts be sent directly to the Admissions Office at LRSU. Unofficial transcripts cannot be accepted. Receiving transcripts is the slowest phase of the admissions process. Your personal diligence in this step will speed up your admissions.

Step 3: Have your Christian Character Reference form completed and mailed by that person directly to the Admissions Office.

Step 4: Take the Bible knowledge E-test online. Once an application is received, the applicant will receive an id and password to access the test through Blackboard from the LRSU website.

Within 2 to 3 weeks of completing all of these steps, you will receive a final acceptance packet via regular mail. The packet outlines your course of study and tells you exactly how to get started.

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CHRISTIAN CHARACTER REFERENCE

TO THE APPLICANT:

This questionnaire is to be completed by a pastor or church leader who is not a relative.

APPLICANT INFORMATION

Name of Applicant: Dr. _____
Rev. _____
Mr. _____
Miss _____ Last _____ First _____ M.I. _____
Mrs. _____
Address of Applicant: _____

TO THE REFERENCE PROVIDER:

Your comments will be given serious attention and will be regarded as confidential. Please mail this form directly to the Office of Admissions, Luther Rice Seminary & University, 3038 Evans Mill Road, Lithonia, Georgia 30038.

DO NOT GIVE FORM BACK TO THE STUDENT.

SUBMIT IT DIRECTLY TO THE LRSU ADMISSIONS OFFICE.

1. How well do you know the applicant? [] casually [] fairly well
[] quite well How long? _____ years.
2. To the best of your knowledge, has the applicant made a personal profession of faith in Jesus Christ? [] Yes [] No [] Unknown
3. To what extent has the applicant participated in the activities of the church?

4. In your estimation, does the applicant exert a good influence on his/her peers?
[] Yes [] No If not, please explain on the reverse side.
5. Are you aware of any personality traits which hinder the applicant in relationships with others? [] Yes [] No If yes, please explain on the reverse side.

6. Please comment on any special circumstances, home conditions, etc., which might prove helpful in considering the applicant's admission to the University.

7. Please circle your recommendation of the applicant for admission to Luther Rice Seminary & University:

Highly recommended

Recommended

* Recommended with reservations

* Not Recommended

* Please indicate the reason(s) for this recommendation on a separate sheet.

Print Name: _____ Date: _____

Signature: _____

Church: _____ Position: _____

Address: _____

Street or P.O. Box

City

State

Zip

Web Address: _____

Phone number where you can be reached from 9 AM - 4 PM :

() _____

Email Address: _____

DO NOT GIVE THIS FORM BACK TO THE STUDENT. SEND IT DIRECTLY TO THE LRSU ADMISSIONS OFFICE.

Applicant: Please photocopy this form, complete it (including signature), and send it to your high school and to each college, university, seminary, or institutions of higher learning you have attended.

Official Transcript Request

To: **Office of the Registrar, Student Records**

Name of High School, College, or Seminary

City State Zip

Please forward one (1) official copy of my transcript to:

Office of Admissions
Luther Rice Seminary & University
3038 Evans Mill Road
Lithonia, GA 30038

Student's name _____

Maiden or previous name(s) _____

Social Security Number _____

Branch or campus attended _____

Date first attended _____ Date last attended _____

Degree(s) Received _____

Enclosed is \$ _____ for cost of transcript.

Signature of Student Date

Street Address

City State Zip

Luther Rice Seminary & University * Office of Admissions
3038 Evans Mill Road * Lithonia, GA 30038 * 1-800-442-1577

For specific information or questions you might have, please use our phone and email contacts below.

Luther Rice Seminary & University
3038 Evans Mill Road
Lithonia, GA 30038

Phone/Fax

General Information	770-484-1204	Local
	1-800-442-1577	Toll Free
General Fax	770-484-1155	
Finance Office Fax	678-990-5388	

Email

Main Address	information@LRU.edu
Admissions Office	admissions@LRU.edu
Registrar's Office	registrar@LRU.edu
Student Accounts	studentaccounts@LRU.edu
Online Education	distanceed@LRU.edu
Financial Aid	financialaid@LRU.edu
Library	library@LRU.edu
International Ministries	intlmin@LRU.edu
Student Services	studentservices@LRU.edu
Development/Gifts	Russ@LRU.edu
Alumni	alumni@LRU.edu

Earn Your Entire Degree
Online at Luther Rice

**Contact the Admissions Office
for enrollment information at
1-800-442-1577 or
Admissions@LRU.edu.**

**Begin to fulfill your
dreams today!**