

FULL STATUS APPLICATION
(For Students Admitted under Provisional Status)

Students who were admitted with provisional status to the Master of Divinity or Master of Theological Studies program must apply for full status at the end of their second semester. Part-time students may request to apply at the end of their third semester. **Admission to the MDiv or MTS program as a provisional student does not guarantee admission to full status.** Admission to full status is based upon successfully meeting the enrollment requirements and full status application requirements as outlined in the provisional student status policy.

DEADLINES

- The deadline to submit all application materials is January 15 (if you began PSR in the spring) or June 15 (if you began PSR in the fall). Decisions will not be made until final grades are available from the previous semester. Applications not received or complete by January 15 or June 15 will be billed a \$50 late fee.

APPLICATION INSTRUCTIONS AND REQUIREMENTS

Along with this application form, you must submit the following to the PSR Admissions Office:

- Two letters of reference** from GTU faculty members (one of which must be a PSR faculty member). Provide the **PSR reference form** to your referrers and be sure to indicate on the reference form whether you wish to waive your right to read the letter.
- Copy of **one academic paper** that you have written for one of your basic required courses (minimum of five pages).
- Your signature below releasing your **official PSR transcript** to the Admissions Office.

YOUR INFORMATION

I am applying for full status in the _____ MDiv or _____ MTS program for Fall 20 _____ or Spring 20_____.

Name: _____

Address: _____

Phone: _____ Email _____

ART OF ACADEMIC WRITING COURSE

I have successfully completed the Art of Academic Writing Course in the following term:

- January Intercession Summer Session of 20_____

TRANSCRIPT RELEASE

My signature below provides written permission to the registrar to release my official PSR transcript to the PSR Admissions Office.

Signature

Date

REFERENCES

Please provide the contact information for the two faculty members who will provide a reference for you. Be aware that you must contact your referrers to request a reference letter and provide them with a reference form.

1. Name: _____ Email: _____

2. Name: _____ Email: _____