



# ESWATINI COLLEGE OF THEOLOGY

IN CO-OPERATION WITH GLOBAL UNIVERSITY, USA.

P.O. BOX 2207, MBABANE H100, FARM 64/50, MANTENGA DRIVE  
EZULWINI, ESWATINI

## APPLICATION FOR ADMISSION (Diploma/Certificate)

Work hard so that God can approve you, be a good worker, one who does not need to be ashamed and who correctly explains word of truth. [2Timothy 2:15/NLT]

New Applicant  Reactivating student

Have you previously enrolled as a Bible/ Theology student? Yes  No

Have you ever studied in another Global University National Office? Yes  No

(if yes to the above): Former Student No: \_\_\_\_\_

Former Enrolment Office? \_\_\_\_\_

Applying as: (please tick) Correspondence student  full time student  Saturday student

Family Name/ Last Name: \_\_\_\_\_ Maiden Name \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Tel: \_\_\_\_\_

Phone \_\_\_\_\_ Cell: \_\_\_\_\_

Country \_\_\_\_\_ Email: \_\_\_\_\_

Title: Mr  Ms  Mrs  Rev  Dr

Gender: Male  Female  Date of Birth:  /  /

Marital status:  Single  Married  Widowed  Divorced

Number of children (if any)

### Denomination

Country of Citizenship: \_\_\_\_\_ Assemblies of God

Mother Language: \_\_\_\_\_ Protestant

Other Language: \_\_\_\_\_ Other Pentecostal

Roman Catholic

Other (specify): \_\_\_\_\_

TEL: (+268) 2416 1734/  
78146527



info@eswatinicollegeofthology.org



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### MINISTRY INFORMATION

Are you a Senior Pastor?  Asst. Pastor?  Church Committee?  Lay Worker?  Chairperson?   
Youth Leader?  Any other \_\_\_\_\_

Name of Local Church: \_\_\_\_\_

Name of Denomination \_\_\_\_\_

Where are you staying or preaching at the moment? \_\_\_\_\_

Name of your Senior Pastor or Mentor \_\_\_\_\_

### ACADEMIC INFORMATION

Highest Education Level completed (i.e. Secondary/ High School or Post-secondary)  
\_\_\_\_\_

List any post-secondary institutions you have attended (i.e. trade school, Bible College or University):

institution	Dates Attended	Major	Certificate/Diploma/Degree

### FINANCIAL INFORMATION

Who will pay your fees? Yourself  Sponsor  Church  Other

Do you promise to pay all required fees on time? \_\_\_\_\_

NOTE! After two weeks of payment of your fees, you will not be refunded should you feel it necessary to cancel your registration with us.

### PERSONAL/ MINISTERIAL

Have you personally received Jesus Christ as your Lord and Saviour?

If yes, briefly describe your salvation experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Please describe your current personal spiritual condition or level of spiritual maturity and Baptism in the Holy Spirit: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you desire to attend ECT and how will you use the training you will receive at ECT in serving Christ and your local church?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What church or ministry activities are you involved in? \_\_\_\_\_

\_\_\_\_\_

Are you ordained? \_\_\_\_\_ If yes, when? \_\_\_\_\_

### REFERENCES

Please list two leaders/ people who could recommend you to ECT

NOTE: MUST NOT BE RELATIVES:

NAME	POSITION	ADDRESS/ EMAIL	TEL/CELL

### TERMS OF AGREEMENT

I agree that attendance at Eswatini College of Theology is a privilege. That privilege may be lost through any activity that is not keeping with the biblical standard of conduct as revealed in God's word.

I agree that I will do my very best to always conduct myself as a Christian gentleman/ lady. In the event that a dispute arises which cannot be resolved between me and the administration, I agree that the dispute will be settled by arbitration rather than through the courts of Law. **1 Corinthians 6: 1-8**

I further agree that I will pay my school bills in accordance with the schedule established by the Board of Administration of Eswatini College of Theology. I will be in class during class time, and I promise to abide by the rules and regulations of the college.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## IMPORTANT

The following data must be received before we can evaluate your application; please check that you have included or sent each of the following items:

- \*E200.00 Application fee payable to Eswatini College of Theology
- \*Two recent official passport size photographs of yourself
- \*Certified copy of Form 5 Certificate("O" Level)

## CERTIFICATION

I DECLARE THAT ALL THE INFORMATION I HAVE GIVEN IN THIS APPLICATION IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE, I ALSO DECLARE THAT I HAVE READ AND THAT I AM IN AGREEMENT WITH THE DOCTRINAL STATEMENT

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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SPIRITUAL ANOINTING"

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TO BE FILLED BY YOUR SPOUSE/COLLEAGUE

Applicant's name (s): \_\_\_\_\_

\*please answer the following questions honestly and accurately, sign and date this form, return the confidential form to ESOM in the enclosed addressed, stamped envelope.

Thank you very much for your kind assistance:

1. How long have you known this applicant?

\_\_\_\_\_

2. In what ways does the applicant show definite signs of spiritually?

\_\_\_\_\_  
\_\_\_\_\_

3. What characteristics qualify him for this training and ministry?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you describe his ministry skills experience and spiritual gifts?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you the reason why he is not biblically or personally qualified as pastor?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

"PURSUING ACADEMIC EXCELLENCE WITHOUT NEGLECTING SPIRITUAL ANOINTING"

5. Can you recommend this applicant without any conditions? \_\_\_\_\_

\_\_\_\_\_

6. Email address: \_\_\_\_\_ Phone/Cell: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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