FORM NO. 1

Serampore College

College founded by Carey, Marshman and Ward, 1818,
Incorporated by Royal Charter, 1827, and
Bengal Act of 1918, as modified
upto Government of
West Bengal, 1997

Faculty of Theology

P.O. Serampore, District: Hooghly, West Bengal – 712201

Staple 4 Passport size Recent Photographs

Eligible Candidate Class – XII & Dip.BT Passed	**Application for the Admission of** **BACHELOR OF BIBLE TRANSLATION STUDIES**

IMPORTANT INSTRUCTIONS:

a) Read the Application Form carefully and fill in all the entries clearly and legibly in English only. Incomplete and unclear application will be rejected.
b) **Attach all documents required as mentioned** (wherever necessary) in the application form.
c) The form duly filled in along with all the required documents must be sent to the '**Vice – Principal, Faculty of Theology, Serampore College, P.O. Serampore – 712201, Hooghly District, West Bengal'**, on or before 15th October 2019.
d) 1st Installment Fees of **Rs 9650/-** in Demand Draft drawn in favour of **PRINCIPAL, SERAMPORE COLLEGE** payable at Serampore must be sent along with this form.

1. Name of the Applicant in Full (in BLOCK LETTERS as per the Board/Degree Certificate)

_____

2. Date of Birth _____/_____/ _____ (DD/MM/YYYY) **3. Sex** _____
(Attach attested copy of the Birth Certificate/Board Certificate as proof)

4. Father's Name _____

5. Mother's Name _____

6. Email ID _____

7. Address for Correspondence House No._____ Locality _____

Village/Town/City _____ District _____

State _____ PIN _____

Phone _____ Mobile _____

8. Nationality _____ **9. Mother Tongue** _____

10. Academic Record: List all examinations passed, starting from High School **(***attach attested copy of Mark Sheets and Certificates of all Examinations)*

Sl. No	Certificate /Degree	Board/University	Division	Year

11. Name of the Tutor: _____

12. Name of the Organisation where the Tutor is working _____

_____

_____

13. State whether you have any experience in Translation work in the Past: _____

_____

_____

_____

DECLARATION OF THE APPLICANT

I _____ declare that all the information given above are true and correct. I understand that any information which I have furnished above, if proved to be false or incorrect, will automatically terminate my candidature.

Date: _____ **Signature of the Applicant**

‘

LETTER OF RECOMMENDATION

FORM NO. 2

CHURCH/ ORGANISATIONAL RECOMMENDATION

APPLICANT’S INFORMATION (*To be filled in by the Applicant*)

Name of the Applicant _____

REFERENCE *(To be filled in by the Referee)*

Name of the Referee _____

Address _____

City/Town _____ District _____

State _____ PIN _____

Phone _____ Mobile _____ Email _____

Name of Church/ Organization _____

Designation _____

1. Is the Applicant Recommended by the Church Leader or Leader of Bible Translating Organisation _____

2. Write in brief the account of the applicant’s ministerial experience and particularly in bible translation work_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Date: _____ **Signature of the Leader/Referee**