



HONORING ALL PATHS

THE NEW SEMINARY

APPLICATION FORM, PART I

INTERFAITH MINISTERS TRAINING PROGRAM

Please type or print clearly. Complete all information and return with a recent photo and your non-refundable \$175 application fee, payable to "The New Seminary," to:

Registrar, The New Seminary
2576 Broadway, #344
New York, New York 10025

Or fax to: 212-864-8355, and
follow up by mailing original.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____

Work Phone: () _____

Fax: () _____

E-mail: _____

Occupation: _____

Date of Birth (Optional): _____

How did you learn about The New Seminary?

I wish to enroll as a:

Attending Student

Accelerated Student

Correspondence Student

I have enclosed or will forward letters of recommendation from the following people:

(1) _____

(2) _____

Please list briefly your educational background/work history (or attach resume):

Please answer the following (Attach additional sheets if necessary)

(1) What attracts you to The New Seminary Training Program for Interfaith Ministers?

(2) Write a brief description of your religious background and your spiritual journey/exploration to date.

(3) Describe briefly your current spiritual practice.

(4) Have you had personal experience and/or professional training in psychotherapy, spiritual counseling, or other personal growth work? Please describe briefly.

I would like to pay my \$175 Application Fee by credit card:

Card No: _____ Exp: _____ Type: _____

I affirm that all the above statements are true.

Signature: _____ Date: _____