

# For Canadian citizens and permanent residents AMBS Admissions Application Fields

To assist you in preparing to complete the online AMBS Admissions Application, the content of the application appears on the following four pages so that you can know which information you will be asked to supply. The application software will automatically save your work, so you can complete the form in installments if needed. Please note that this document is not the actual application form; applicants must use the online form.

#### Name and contact information

First name Required Middle name Last name Required

Maiden name, if applicable

Preferred name Required

Current home address Required

**Preferred mailing address** 

(If different than above)

Mailing address for I-20

(If different than above)

Telephone number Required
Phone type Required
Email address Required

#### Personal data

Date of birth Required Gender Required

Social Insurance Number Required

City of birth Required
Country of birth Required
Citizenship Required
Marital status
Name of spouse

Names of family members

If you are moving to campus or relocating to the Elkhart area and have other family members accompanying you (including spouse and minor children), please enter their information here (name, date of birth, gender and relation to you).

#### Passport scans

Please scan the first page of your passport and the passports of all family members who will accompany you to AMBS.

How did you become acquainted with AMBS?
Required

Reason for applying Required

What was most important in your decision to apply to AMBS?

#### **Academic objectives**

Select the program and concentration for which you are applying.

#### Program of study Required

- ☐ Master of Divinity Campus
- ☐ Master of Divinity Connect
- ☐ Master of Arts in Christian Formation☐ Master of Arts: Theology and Global Anabaptism
- ☐ Master of Arts: Theology and Peace Studies
- ☐ Graduate Certificate in Theological Studies

Indicate MDiv Major or MATPS Concentration

### When and where do you plan to begin studies?

Term Required

(Note: The option to start in Semester Two is only open to Graduate Certificate students.)

**Location** Required

Intended enrollment status Required

#### **Religious affiliation**

Current denomination Required
Current conference/regional church
Current congregation Required
Previous denomination, if applicable
Previous conference/regional church,
if applicable

I am (choose any/all that apply) Required

- ☐ Licensed for ministry
- ☐ Ordained for ministry
- □ Not credentialed

#### Personal essay

#### **Application essay**

Please submit a personal essay (1,200 to 1,800 words, double-spaced) describing your desire to pursue a graduate theological degree at AMBS. Detail experiences and influences that have led you to seek a seminary education; ways that you believe this degree program will help you meet your vocational, educational and spiritual goals; and your understanding of the level of commitment this will require. Include in your answer an assessment of your gifts and abilities and how you expect to grow. This should reflect your best work, and it must be your own writing. Short phrases pulled from other sources may be used only if they are cited correctly.

Essays may be uploaded here or sent via email attachment (Microsoft Word document or PDF) to admissions@ambs.edu.

#### **Academic background**

Please list all colleges, universities and seminaries attended.

Name of Institution 1 Required
Location of Institution 1 Required
Attended from (month/year) Required
Attended to (month/year) Required
Degree granted Required
Degree and major Required

Name of Institution 2 Location of Institution 2 Attended from (month/year) Attended to (month/year) Degree granted

#### Degree and major

#### Additional institutions

#### **Academic awards**

#### Academic dismissal Required

Have you ever been dismissed or suspended from an academic institution?

#### Work experience

Briefly describe any work and volunteer experience, especially that which contributes to your academic and vocational goals. We are interested in knowing about work you have done inside and/or outside a church setting, e.g., Christian education, preaching, church music, youth work (summer youth camps, etc.), community service, social work, etc.

#### Work experience Required

List names of churches/agencies, tasks performed and time spent in each place.

#### References

Applicants to AMBS are required to have references in support of their goals for seminary study and/or their sense of call to ministry. Please list the names of (1) a pastor or conference minister, (2) a college professor, academic advisor or someone who can evaluate your reading and writing ability, and (3) a colleague who can provide this kind of reference for you. (If you completed your most recent education more than 10 years ago, you may choose to supply an employer reference in lieu of an academic reference.) We will send the appropriate reference form to each person using the email addresses you provide below.

### We do not accept references from a spouse or relative.

CONFIDENTIALITY STATEMENT: It is the policy of AMBS that reference forms are kept confidential, are not made available to the applicant, and are destroyed once we have made a decision about admission and scholarships (if applicable).

Pastoral reference name Required
Pastoral reference email address Required
Academic reference name Required
Academic reference email address Required
Layperson reference name Required
Layperson reference email address Required

#### Housing

## Please select your housing plans: Required Date when you would need housing

To arrange for campus housing, please complete a Housing Application and submit a deposit. Applications can be found at www.ambs.edu/admissions/housing-application.

#### **Emergency contact**

Please provide the name and information of someone we should contact in case an emergency arises while you are an AMBS student.

Name (first and last) Required
Relationship Required
Address Required
Telephone number Required
Phone type Required
Email address Required

#### Health insurance requirement

You are required to hold health insurance for yourself and any family members joining you in the U.S. This insurance must meet certain requirements, so provincial insurance may need to be supplemented. More information will be provided with admissions and enrollment materials.

#### **Criminal history**

#### Have you ever been convicted of a crime?

(not including a minor traffic violation) Required **Details and explanation** 

#### **Background check**

As a condition of admission, an applicant will be required to authorize Anabaptist Mennonite Biblical Seminary (AMBS) to obtain a background check. If the results of the background check are not deemed acceptable, AMBS will evaluate the results based on the nature of the violation and extenuating circumstances. (AMBS does not automatically deny admission based on minor offenses.)

Any information provided by the applicant regarding his or her background check will be included for consideration in his or her application for admission. If the applicant is admitted, AMBS will store a copy of the background check in the student's file in perpetuity, either on paper or digitally archived. If the applicant is not admitted, AMBS will store the entire application, including the background check, in the seminary's admissions files for a period of two years, after which the application will be destroyed in its entirety.

Please complete the following three forms and return them to the Admissions Office via email (admissions@ambs.edu) or postal mail:

AMBS Admissions Office 3003 Benham Avenue Elkhart, IN 46517-1947 USA

FCRA Disclosure Form.docx Background Check Consent.docx CanIntl Profile Form.pdf

#### **AMBS Mission and Values**

Admission to AMBS assumes a commitment on the part of every student to join and participate in a community devoted to theological education and preparation for ministry, worship, study and the life of Christian faith. This community, whether on campus or at a distance, is part of and accountable to the church of Jesus Christ, the Anabaptist-Mennonite tradition and the seminary's sponsoring churches (Mennonite Church Canada and Mennonite Church USA). It is understood that all members of the seminary community will respect the confessions, convictions, values and commitments of the tradition and the churches that AMBS serves, and will respect other traditions represented in the community and in the places where members minister and learn. It also is understood that members of the community will respect the core values of AMBS and the seminary's commitment to antiracism and welcoming Christians of diverse traditions and ethnicities.

To read the mission and values of AMBS, visit www.ambs.edu/about.

## Acknowledgment of requirements and commitment

I have read the information above and understand the mission and values of AMBS (www.ambs.edu/about). My filing of this application indicates my willingness to cooperate with the standards and purpose of the seminary. I agree to withdraw my enrollment should I find myself unable to support them.

#### Acceptance of above statement Required

To indicate your acceptance, please type your full name in the box below.

#### **Application fee waiver**

If you recently attended a conference at AMBS, please indicate the name of the conference here. Your application fee will be waived if you complete your application within 30 days of the conference.

#### **Application fee**

The nonrefundable application fee of USD \$50 may be paid in the form of a check or money order, or by using VISA, MasterCard or Discover. To make a payment or for further instructions about sending a check, please visit

ambs.edu/admissions/application-fee-payment.

Your application is not complete until we receive your payment.

The USD \$350 SEVIS fee that is required for an F-1 student status visa is covered for Canadian students by a special fund; you do not have to pay this fee.

#### Pay online with credit card

To submit the \$50 nonrefundable application fee online with a credit card, go to: ambs.edu/admissions/application-fee-payment

#### Call AMBS with credit card information

To submit the \$50 nonrefundable application fee by phone using a credit card, please call 800-964-2627 ext. 0 and have your credit card ready.

#### Pay with PayPal

To pay via PayPal, go to: ambs.edu/admissions/application-fee-payment

#### Pay with a personal check

To pay by check, please send the \$50 nonrefundable application fee payable to "AMBS" to:

AMBS Admissions Office 3003 Benham Avenue Elkhart, IN 46517-1947 USA

Please indicate your full name on the check.

If you have any questions about the information that is required for the Admissions Application, please contact Enrollment and Financial Aid Specialist Teresa Thompson Sherrill at tsherrill@ambs.edu or 800-964-2627 ext. 227.

6-18-2021