FORM NO.	

## AIZAWL THEOLOGICAL COLLEGE

(Affiliated with Senate of Serampore College) Post Box - 167, Aizawl - 796 001, Mizoram, India

Affix recent Photograph (Passport size)

## APPLICATION FORM Diploma in Clinical Pastoral Counseling (D.C.P.C) Degree Course

1. Name of the applica	nt (in block letter	rs)			
2. Date of Birth	Date of Birth Place of Birth				
3. Gender (Male/Femal	nder (Male/Female)Mother Tongue		Nationality		
. Father's name Occu			ccupation		
Mother's name Occu			ccupation		
6. Total Annual Incom	e of the family_				
7. Guardian's name (if	applicable)				
Occupation Annual Income					
8. Present Address of	the Applicant				
Pin code	Teleph	one No			
9. Permanent Address	(if different from	present address) _			
	Pin code 7				
10. Is the applicant sin	gle or married? _				
11. Educational Qualis	fication of applic	ant			
Course	Year	Division	Board/University		
13. Name of local Chur	ch to which he/sh	e is attached			
Date	<del></del>		Signature of the Applican		

## **NOTE**

- 1. Recent passport size photograph of the applicant has to be affixed.
- 2. Attested copies of the **certificates and marks** of the applicant from **H.S.L.C**. or its equivalent onwards must be attached.
- 3. Church Recommendation from Pastor or local Church Committee should be attached.
- 4. A medical examination form is enclosed with this form. This should be duly filled.
- 5. There will be elligibility test for all the applicants.
- 6. All the applicants will be personally intereviewed by Theological Education Board.
- 7. The completed application form should be sent to the Principal, Aizawl Theological College, Post Box 167, Aizawl 796 001, Mizoram, India.