

Trinity Theological Seminary of South Florida

APPLICATION FOR DEGREE

(To be completed and signed by Administrator and Student Candidate)

I hereby submit this "Application for Degree," whereby the following degree(s) be conferred upon the student listed below. I hereby declare that he/she has fulfilled all requirements of the degree plan, and is in good academic standings as per all policies and guidelines established. I hereby further declare the student listed below is prepared to enter the harvest field as a laborer for the Gospel Ministry of Jesus Christ, a workman that has studied to show him/herself approved to God, a workman that need not be ashamed. **Deadline for Submission – The last Monday in January, 20____.**

Print Student's Name as it should appear on Degree

Student's Social Security Number

Street Address or PO Box

Home Telephone Number

City State FL

DEGREE INFORMATION:

(Associate, Bachelor, Master, Doctor)

(Biblical Studies, Theology, Ministry
Christian Education, Christian Counseling)

GRADUATION FEE AMT. PAID: _____ **DATE PAID:** _____

CAP & GOWN INFORMATION: _____
Height (Feet & Inches) Weight (In Pounds) TASSEL ONLY

STUDENT NAME

STUDENT SIGNATURE

FACILITATOR NAME

SITE LOCATION

FACILITATOR SIGNATURE

DATE

Note: Tuition must be "PAID IN FULL" by the third week of the final term. Undergrad Grad Fees - \$300 – Graduate Fees - \$350 -Student must sign here acknowledging that they have read and understood that Degrees will NOT be released to students with a remaining balance.

X _____