



CARIBBEAN GRADUATE SCHOOL OF THEOLOGY
MASTER'S DEGREE

STUDENT HEALTH INFORMATION

Applicant to complete in full the following section:

NAME _____

SEX (M)___/(F)___ BIRTH DATE ___/___/___
Day Month Year

MARITAL STATUS _____

ADDRESS _____

PHONE (H) _____ (W) _____ E-MAIL _____

ALLERGIES [state name of substance(s) and type of reaction(s)]:

HOSPITALIZATION [state dates & type of illness/surgery/injury]:

CHRONIC MEDICAL CONDITIONS [Tick any that apply]

Asthma _____ Hypertension _____ Diabetes _____

Cancer _____ Epilepsy _____ Physical Handicap _____

Sickle Cell _____ Other _____ [Please state]: _____

Are You In Good Health? Y___/ N___ Do you have any physical disability? Y___/ N___

If yes, please state the nature and any special assistance you may require:

Has it ever been necessary for you to discontinue your study or work because of physical illness or psychological problem? Y____ / N____ If so, please provide a written explanation on a separate sheet.

MEDICAL EXAMINATION BY PHYSICIAN

To be completed by a physician:

BP _____ Pulse Rate _____ Height _____ Weight _____
Hearing _____ Eyesight _____

IMMUNIZATIONS: [Provide verification that these are up to date. If no verification can be provided, a physician should administer as necessary]:

BCG _____ Polio _____ Tetanus Booster dT _____ MMR _____

* Yellow Fever _____ * Malaria _____ Hepatitis B _____

* (These two are required in addition to those above for international students)
(recommended, not compulsory)

Review of Systems/Physical Exam: Note any significant findings or suggestions for other diagnostic work.

I certify that this applicant is in good health and able to undertake the programme of study.

Name: _____ Address: _____ Phone: _____

Date _____

ACCEPTANCE OF LEADERSHIP

- Strongly supportive
- Usually cooperative
- Works against superiors
- No opportunity to observe

WILLINGNESS TO SERVE

- Eager to serve as needed
- Usually willing to serve
- Inconsistent in service
- Reluctant to serve

No opportunity to observe

LEADERSHIP

- Always exercises leadership
- Usually exercises leadership
- Never exercises leadership
- No opportunity to observe

INITIATIVE

- Highly motivated
- Sometimes initiates
- Succeeds if told what to do
- Needs constant supervision
- No opportunity to observe

EMOTIONAL STABILITY

- Well balanced and controlled
- Usually well-balanced
- Somewhat over-emotional
- Inclined to be apathetic
- No opportunity to observe

CHARACTER

- High moral and spiritual standard
- Shows growth and maturity
- Inconsistent Attitudes and Practices
- Indifferent to moral and spiritual standards

No opportunity to serve

SOCIABILITY

- Deeply concerned for others
- Interested and helpful
- Indifferent to others
- Self-centered
- No opportunity to observe

SOCIAL ACCEPTABILITY

- Sought by others
- Liked by others
- Tolerated by others
- Avoided by others
- No opportunity to observe

4. I recommend this applicant for admission to the Caribbean Graduate School of Theology.

Unreservedly [] With reservations [] Do not recommend []

Comments: _____

Referees Name (in full)	Signature	Date
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Address _____

CHURCH ENDORSEMENT

To be filled out by Church Secretary or other Church Official

Is the applicant a member of your church? _____ Is the applicant in good standing? _____

If not, please explain: _____

Date the applicant was received into membership: _____

Your Name: (Please type or print) _____

Signature	Date
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Name of Church: _____

Address of Church: _____

Telephone Number: _____ Official Stamp: _____



**CARIBBEAN GRADUATE SCHOOL OF THEOLOGY
MASTER'S DEGREE**

P.O. Box 121, 18-20 West Avenue, Constant Spring,
Kingston 8, Jamaica W. I.

Website: www.Cgstonline.org

RECOMMENDATION FROM LECTURER OR ACADEMIC ADVISOR

This form is to be filled out by a lecturer or an academic advisor who has taught the applicant and is not a member of the applicant's immediate family. Please mail this form to the Admissions Office of the Caribbean Graduate School of Theology.

Applicant's Last Name

First Name

Middle Name

The Applicant named above is applying for admission to the Caribbean Graduate School of Theology, which strives to equip men and women for various forms of Christian Ministry

- 1.) How long have you known the applicant? _____
- 2.) How well do you know the applicant? _____
- 3.) In what capacity? _____

QUALIFICATIONS

Please rate the applicant with respect to each of the characteristics listed below by placing a tick [] the item under each heading, which most adequately represents your evaluation.

PHYSICAL CONDITION

- Good Health
- Fairly Healthy
- Somewhat below par
- Frequently incapacitated
- No opportunity to observe

CHRISTIAN LIFE

- Exerts Christian influence
- Active Church Member
- Attends services only
- Uncertain of commitment
- No opportunity

TEAMWORK

- Works well with others
- Usually cooperative
- Prefers to work alone
- Frequently causes friction
- No opportunity to observe

INTELLIGENCE

- Brilliant; exceptional capacity
- Alert; has a good mind
- Average mental ability
- Learns and thinks slowly
- No opportunity to observe

RELIGIOUS EXPERIENCE

- Rich and growing
- Genuine but mild
- Over-emotional
- Relatively superficial
- No opportunity to observe

RESPONSIVENESS to the feelings
and needs of others

- Insightful and considerate
- Understanding and thoughtful
- Reasonable responsive
- Slow to sense how others feel
- No opportunity to observe

ACCEPTANCE OF LEADERSHIP

- Strongly supportive
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RECOMMENDATION FROM PROFESSIONAL ACQUAINTANCE/ EMPLOYER

This form is to be filled out by a professional acquaintance or employer (in a supervisory position) who is not a member of the applicant's immediate family. Please mail this form directly to the Admissions Office of the Caribbean Graduate School of Theology.

Applicant's Last Name	First Name	Middle Name
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