



# Christian Leaders' Training College of Papua New Guinea



An Registered Institute of Higher Learning

Admissions Office: [admissions@cltc.ac.pg](mailto:admissions@cltc.ac.pg) +675 7456 6529 / 7637 0309

## APPLICATION FORM FOR 2025 POSTGRADUATE INTAKE SINGLE APPLICANTS

Name: \_\_\_\_\_

### *Master of Theology*

**About the Master of Theology (MTh) Program:** The MTh particularly equips theological educators for colleges in the South Pacific. It also will equip Christian ministers and Christian service agency personnel for contextualized ministry in the South Pacific.

**Pre-requisites:**

1. A theological degree or equivalent from CLTC or other accredited institutions.
2. Theological research as evidenced in a Bachelor's thesis or other significant writing.
3. Competency with computers, especially word processing.
4. Good grasp of English language.

**MTh Award Completion-** the MTh program is an academic and research oriented graduate program. The MTh consists either of seven taught courses and a 20,000 word thesis or eight taught courses and a 10,000 word thesis. Each course requires a total of 300 learning hours, including class and personal study, and requires approximately 8,000 words of writing. Students with a focus on Biblical studies will be required to take Greek and Hebrew as one of their courses.

**Full-time or Part-time** – Students generally study full-time at the Banz campus. Some courses are available as 3-to-4-week intensives with course work required before and after the intensive. This allows for students to come for selected courses and so complete the degree part-time.

**MTh Fees and Sponsorship-** see pages 8.

**OFFICE USE ONLY** Indicate below the date that each item is received

Main appl	Church	Community	Health	Certificates	Work Exp	Int'l	English

## Sit for your CLTC Entrance Test

Contact the Admissions Office, or a CLTC Admissions Agent. (See the “CLTC Admissions Agents” section near the back of the application packet.) They will require a K50 application fee to administer the test and assist you with your application.

## Complete the following checklist

### For you to complete

- “Curriculum Vitae” section

### For you to start, and then detach for others to complete and return to you

- “Church Endorsement” form
- “Community Endorsement” form
- “Health Information” form

### For you to provide copies as supporting documents

- Bachelor’s final project or thesis  
Electronic copy of your final project report or thesis.
- Certificates / transcripts of education completed
  1. Highest tertiary, secondary, or primary education
  2. Any additional certificates or awards
- Evidence of work experience
  1. Reference letters, and/or...
  2. Curriculum vitae (CV)
- International applicants  
Copy of the bio-data page of your passport for you as a couple, and any children who will accompany you

## Detach and save the last page “Keep This Page”

On the last page of this application packet, fill in the date you submit your application and save the page for your records and to plan your next steps.

## Submit all of the above documents

### Email

admissions@cltc.ac.pg

### MAF or Post Office

Admissions Office  
Christian Leaders’ Training College  
PO Box 45  
Banz, Jiwaka Province 283  
PAPUA NEW GUINEA

### In Person

Admissions Office  
CLTC Main Campus  
Sigiri Village  
Banz, Jiwaka Province

<b>Full name</b>			
<b>Date of birth (dd/mm/yy)</b>		<b>Phone numbers</b>	
<b>Email addresses</b>			
<b>Postal address (optional)</b>			
<b>Church</b>		<b>Denomination</b>	
<b>Country</b>		<b>Province</b>	
<b>District</b>		<b>Ward</b>	

<b>Highest school grade completed</b>		<b>Year</b>		<b>Name of school</b>	
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<b>Trade/college/university qualification</b>	<b>Years</b>	<b>Name of school/college/university</b>

<b>Work or ministry position (full-time)</b>	<b>Years</b>	<b>Organisation</b>

For single parent: Children you intend to bring to CLTC.

<b>Children's names</b>	<b>Age</b>	<b>Grade</b>	<b>Children's names</b>	<b>Age</b>	<b>Grade</b>

**Adopted child/children:** If any of the above children are adopted, you must attach one of the following:

1. A legal adoption document, or if not available...
2. A letter from the child's biological next-of-kin, verifying customary adoption.

**Describe how you came to follow Christ. Share briefly your experience since then.**


**Why do you want to study at CLTC?**


**What do you hope to do when you graduate from CLTC?**


## Student Fees

The annual fee is listed in the table below:

	Tuition	Child cost	Food Allowance	Housing	Medical Fee	SRC Fee	House Bond	TOTAL FEE	Less LLI Sponsorship	FEE less Subsidy
Single	8,000	0	2,040	2,500	100	20	200	12,380	4,640	8,220
Single, 1 child	8,000	500	2,880	5,000	150	20	400	16,410	8,030	8,920
Married, 0 Child	12,000	0	3,240	5,000	200	40	400	20,760	8,440	12,440
Married, 1 Child	12,000	500	4,080	5,000	250	40	400	22,030	9,330	12,940
Married, 2 Child	12,000	1,000	4,920	5,000	300	40	400	23,300	10,220	13,440
Married, 3 Child	12,000	1,500	5,760	5,000	350	40	400	24,570	11,110	13,940
Married, 4 Child	12,000	2,000	6,600	5,000	400	40	400	25,840	12,000	14,440
Married, 5 Child	12,000	2,500	7,440	5,000	450	40	400	27,110	12,890	14,940

Most MTh students will receive sponsorship from Local Leaders International (LLI). They work hard to raise funds to support the theological training of men and women who will be able to train others throughout the South Pacific.

Local Leaders International aims to provide funds for the following expenses:

Part of Student Fees:

1. Food allowance (fortnightly payment).
2. Housing costs (including basic furniture and cooking gas).
3. Medical costs.

Extra to Student Fees

4. Travel costs to and from CLTC (at the beginning and end of one's programme)
5. School fees for children's education at local schools.
6. Some text books.

Applicants will be notified of the availability of LLI sponsorship in their acceptance letter. LLI gives priority to those sent by a Bible college or seminary for staff development.

### Other Needs

We strongly recommend that you bring additional funds for additional living expenses. The Dean of Students will also allocate to you a vegetable garden, which you will maintain for yourself and the next student after you.

## CLTC Community Lifestyle Commitment

The Christian Leaders' Training College (CLTC) is a Christian community joined together for the purpose of academic study, personal development and spiritual growth. We are committed to the Lordship of Jesus Christ and believe that the scriptures establish the basic principles that should guide our life together. These principles include the responsibility to love God with all our being, love our neighbours as ourselves, seek after righteousness, practice justice, help those in need, forgive others, seek forgiveness and responsibly exercise freedom with loving regard for others. One of the important lessons you will learn here is about the way you should live together with people from different places and with different customs. We acknowledge that it is impossible to create a community with expectations that are totally acceptable to every member. Nevertheless, clearly stated expectations promote orderly community life. The Word of God tells us that "everything must be done decently and in order" (I Cor. 14:40).

*As a member of the CLTC community, I will strive to practice stewardship of mind, time, abilities and finances. I will pursue opportunities for intellectual and spiritual growth and demonstrate care for my body. I also will exercise social responsibility in my standard of living and use of economic resources. Realizing the destructive character of an unforgiving spirit and harmful discrimination based on prejudice, I will seek to demonstrate unselfish love in my actions, attitudes and relationships. I will be honest and show respect for the rights and property of others. I recognize that some social practices are harmful to me, as well as harmful or offensive to others. Therefore, respecting the values of others and the mission of the Christian Leaders' Training College, I recognize my responsibility as a member of the community to refrain from sexual relationships outside of marriage, sexual harassment and abuse, pornography, acts of violence, abusive or demeaning language and the use of illegal drugs. Recognizing that CLTC supports non-use of alcohol, tobacco, and betelnut, I will respect and abide by the college policy that prohibits their use both on and off campus. I pledge myself to carry out this commitment in a spirit of openness and helpfulness through mutual accountability motivated by love.*

- I have read the Community Lifestyle Commitment and understand the purpose and mission of CLTC.
- I accept the lifestyle expectations as my own while I am a student at CLTC.
- I agree to withdraw from my studies should I find myself unable to uphold the CLTC lifestyle expectations.
- I have also completed the rest of this application truthfully.
- With the support of Local Leaders International, we understand our responsibility to be ambassadors for CLTC and the South Pacific.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## Staff Development Confirmation Form (optional)

*For applicants will be sent by a Bible college or seminary as part of their staff development*

### **Applicants**

Total fees for first year: \_\_\_\_\_

### **Administrator Representing Your Institution**

*Please complete the following to confirm that this couple have been with your institution, and that you are sending them for postgraduate studies as part of staff development.*

Your name (with title): \_\_\_\_\_

Location: \_\_\_\_\_ Name of institution: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Optional – postal address \_\_\_\_\_

For how many years have this couple been with your institution? \_\_\_\_\_

If accepted, how much of their fees will your institution contribute? \_\_\_\_\_

\_\_\_\_\_

In what other ways will your institution support them during their studies? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Your signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Your position in the church:** \_\_\_\_\_

# Church Reference Form

## **Applicant**

Your name: \_\_\_\_\_ Program you are applying for: \_\_\_\_\_

Total compulsory fees for first year: \_\_\_\_\_

## **Pastor, or Church Representative**

*This individual is applying to study at Christian Leaders' Training College. Please complete the following questions to indicate your evaluation of their readiness for training, and your church's endorsement of their plans.*

### **Your Details**

Your name (with title): \_\_\_\_\_

Location: \_\_\_\_\_ Name of church: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Optional – postal address \_\_\_\_\_

### **Your Evaluation of the Applicant**

For how many years have you known this person? \_\_\_\_\_

For how many years have they been active in the church? \_\_\_\_\_

How is their Christian commitment shown in their life? \_\_\_\_\_

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What they doing to help the church? \_\_\_\_\_

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How would you describe their characters, abilities, and potential? \_\_\_\_\_

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**Your Church's Endorsement**

Does your church endorse this individual's application to study at CLTC? \_\_\_\_\_

If they are accepted, what amount of their compulsory fees will the church contribute? \_\_\_\_\_

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If accepted, in what other ways will your church support them during their studies? \_\_\_\_\_

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If accepted, what do you expect them to do after graduating from CLTC? \_\_\_\_\_

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**Your signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Your position in the church:** \_\_\_\_\_

# Community Reference Form

## Applicant

Your name: \_\_\_\_\_ Program you are applying for: \_\_\_\_\_

Total compulsory fees for first year: \_\_\_\_\_

## Community Leader

*This individual is applying to study at Christian Leaders' Training College. Please complete the following questions to indicate your evaluation of their readiness for training, and your endorsement of their plans.*

### Your Details

Your name (with title): \_\_\_\_\_

Location: \_\_\_\_\_ Name of community: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Optional – postal address \_\_\_\_\_

### Your Evaluation of the Applicant

For how many years have you known this person? \_\_\_\_\_

Describe your relationship with them. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are they doing to help the community? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you describe their characters, abilities, and potential? \_\_\_\_\_

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What would be the benefit of this individual training at CLTC? \_\_\_\_\_

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If they are accepted, what amount of their fees will the community contribute? \_\_\_\_\_

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If accepted, in what other ways will your community support this person during their studies?

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What else would you like to say? \_\_\_\_\_

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**Your signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Your position in the community:** \_\_\_\_\_

## Additional Referees

Please supply the names and contact information of two additional people that we may contact for further insight into your suitability for study at CLTC.

They are respected people who know you well. Possible people include:

1. Bible school principal (if you have studied in the last few years).
2. District church superintendent or other denominational leader.
3. Supervisor or employer where you have worked in the last few years.
4. Local government councillor or government official.

### *First Referee*

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Email: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

### *Second Referee*

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Email: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

## Medical Section

Please complete the questions on this page yourself, then give the form to a doctor, community health nurse, or nursing officer to complete the questions over the page.

### Questions to answer about yourself

What serious sicknesses or injuries have you had? What year and what kind?

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What other times did you receive medical treatment? What year and for what reason?

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What physical and health difficulties do you face at the moment?

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Are you willing to stop chewing betelnut, smoking, and drinking alcohol during the time you are students at CLTC? \_\_\_\_\_

### **For single parent – concerning children who will come with you:**

What serious sicknesses and injuries have they had? What year and what kind?

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What other times did they receive medical treatment? What year and for what reason?

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What physical or health difficulties do they face at the moment?

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## Medical Form

Dear Health Officer,

The person presenting this form is applying to study at Christian Leaders' Training College. Could you please assist us by providing the following information:

Height: \_\_\_\_\_ cm    Weight: \_\_\_\_\_ kg    Blood pressure: \_\_\_\_\_

- |  |        |
|--|--------|
| 1. Does the candidate have a visual impairment?  | Yes/No |
| 2. Does the candidate have a hearing impairment?   | Yes/No |
| 3. Does the candidate have a physical disability?  | Yes/No |
| 4. Does the candidate have a history of psychiatric illness?   | Yes/No |
| 5. Does the candidate have a chronic illness?<br>(such as diabetes, epilepsy, asthma, heart condition)   | Yes/No |
| 6. Are there any issues from the medical history the candidate has provided on the previous page that is of concern and could have ongoing implications? | Yes/No |
| 7. Is there any evidence that he/she chews or has habitually chewed betelnut?  | Yes/No |
| 8. Is there any evidence that he/she smokes or has habitually smoked tobacco?  | Yes/No |
| 9. Is there any evidence that he/she smokes or has smoked marijuana?   | Yes/No |
| 10. Is there any evidence that he/she is using or has used illegal drugs?  | Yes/No |
| 11. Is there any evidence that the candidate drinks alcohol?   | Yes/No |

If you answered YES to any of the above questions, please give details below.

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Is the candidate fit and healthy and able to take part in study and work such as gardening, sport and general duties?

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Health Officer's name		
Signature		
Professional role		
Date of examination		
Phone number		
Address		

**PLEASE AFFIX THE OFFICIAL STAMP OF YOUR HEALTH CENTRE/FACILITY/HOSPITAL**



## INDIVIDUALS AND INSTITUTIONS AUTHORISED TO SUPERVISE THE CLTC ENTRANCE TEST

#	NAME	PROVINCE / COUNTRY	CONTACT
1.	Pastor Steven Angkaki ECPNG	Western Province	Mobile: 7393 1585 E-mail: steven.angkaki@gmail.com
2.	Joe Nitnit Baptist	Tabubil, Western Province	Mobile: 72676937 E-mail: jnitnit@gmail.com
3.	Pastor Dacky Wakili ECPNG Training Coordinator:	Western/Hela Provinces	Mobile: 7349 0582 E-mail: dackywakili@gmail.com ecpngshp@gmail.com
4.	Mr. John Bakura Dauli Teachers College	Hela Province	Mobile: 71215940 E-mail:
5.	Ronald Muna Ambassador Bible College	Hela Province	Mobile: 70630041 E-mail: ronaldmuna40@gmail.com
6.	Pastor Simil Hondolwa CLTC Council member.	Mendi Town, SHP	Mobile: 7363 4652 E-mail: ruthhondolwa@gmail.com
7.	Rev. Justin Wapu United Church	Mendi SHP	Mobile: 72439944 Email: jwapu74@gmail.com
8.	Patricia Kambua Admissions, CLTC Banz Campus	Simbu/ Jiwaka/ Enga/ Western Highlands Provinces	Mobile: 7908 7580 E-mail: pkambua@cltc.ac.pg Website: www.cltc.ac.pg
9.	Benjamin Nano BUPNG National Ministry Co-ordinator	Western Highlands Province	Mobile: 7395 6273 Email: bmano@bupng.org.pg
10.	Nancy Dilu Church of the Nazarene	Kundiawa, Simbu Province	Mobile: 79248116 E-mail: dilunancy78@gmail.com
11.	Ps. Jonathan Inapelo Baptist Church Administrator	Goroka, Eastern Highlands Province	Mobile: 7256 6947 E-mail: jinapelo@gmail.com
12.	Mike Saida Zogi Baptist Church	Goroka, Eastern Highlands Province	Mobile: 79327335 E-mail: saidamike8@gmail.com
13.	Ps. Paul Simaure CBC	Vanimo, West Sepik Province	Mobile: 71789077 E-mail:
14.	Pastor Barrywan Tuwai CBC Wewak	Wewak, East Sepik Province	Mobile: 7054 5203 E-mail: cbcpngno@gmail.com
15.	John Judah Brugam Bible College	Maprik, East Sepik Province	Mobile: E-mail:
16.	Gedisa Impact Bible College	Bulolo Wau	Mobile: 70429752 E-mail:
17.	Ps. Jerry Yabru Melanesian Evangelical Churches of Christ (MECOC)	Madang Province	Mobile: 79658095 Email:
18.	Simon Minigamba Dean, CLTC Lae Campus	Morobe Lae	Mobile: 72748218/ 75910559 E-mail: sminigamba@cltc.ac.pg
19.	Jessie Solomon EBC PNG	Morobe Lae	Mobile: 73003886 Email: jessysolomon4@gmail.com
20.	Rev. Geisa Panpan ELC PNG	Morobe Lae	Ph: 70464856 Email: gpanpan63@gmail.com
21.	Rev. David Nason United Church	Milne Bay -	Mobile: 74728019 Email: davidknason@gmail.com

22.	Marcus Fitakec Dean, CLTC POM Campus	Port Moresby, Central/NCD	Mobile: 7703 9617/ 7952 7007 E-mail: <a href="mailto:mfitakec@cltc.ac.pg">mfitakec@cltc.ac.pg</a>
23.	Ruth Akia Administrator, CLTC POM Campus	Port Moresby, Central/NCD	Mobile: 7394 2384/ 75644565 E-mail: <a href="mailto:rakia@cltc.ac.pg">rakia@cltc.ac.pg</a>
24.	Rev. Oscar Kuni United Church	Gulf Province	Mobile: 7328 6974 E-mail: <a href="mailto:oscarkuni92@gmail.com">oscarkuni92@gmail.com</a>
25.	Pastor Andrew Kubwesan ECOM	Manus Province	E-mail: <a href="mailto:aakps29@gmail.com">aakps29@gmail.com</a>
26.	Ben Pia, Principal SSEC Gavuvu Bible College	Hoskins, West New Britain Province	Mobile: 7907 1987 E-mail: <a href="mailto:bpsalu6@gmail.com">bpsalu6@gmail.com</a>
27.	Charles Hausap SSEC	Hoskins, West New Britain Province	Mobile: 71973925 Email: <a href="mailto:charlesjameshausarp@gmail.com">charlesjameshausarp@gmail.com</a>
28.	Peni Diave and Nellis Peni Association of Local Churches, Kinabot	Kokopo, East New Britain Province	Mobile: 71639618/ 72897968 E-mail: <a href="mailto:pdiave@pngpower.com.pg">pdiave@pngpower.com.pg</a> : <a href="mailto:penidiave7534@gmail.com">penidiave7534@gmail.com</a>
29.	Yada James United Church	New Island Province	Mobile: Email: <a href="mailto:jamesyadah2@gmail.com">jamesyadah2@gmail.com</a>
30.	Bishop Abraham Toroi United Church Regional Secretary	Buka, AroB	Mobile: E-mail: <a href="mailto:toroiabraham@gmail.com">toroiabraham@gmail.com</a>
31.	Jeffrey Magum	AroB	Mobile: 7345 9128 Email: <a href="mailto:jeffmagum6@gmail.com">jeffmagum6@gmail.com</a>
32.	Thomas Weape SSEC General Secretary	Honiara, Solomon Islands	E-mail: <a href="mailto:thomasweape087@gmail.com">thomasweape087@gmail.com</a> >
33.	Rolland Hopa UCSI Human Resource Desk	Munda, Solomon Islands	E-mail: <a href="mailto:hrdoffice.uc@gmail.com">hrdoffice.uc@gmail.com</a>
34.	Karl Masing Lecturer, Talua Bible College	Port Vila, Vanuatu	E-mail: <a href="mailto:pskalmasing@gmail.com">pskalmasing@gmail.com</a>
35.	Rev. Dr. Ma'afu Palu	Tonga	E-mail: <a href="mailto:maafu.palu@gmail.com">maafu.palu@gmail.com</a>
36.	Pastor Tuifao Sauaga	Samoa	E-mail: <a href="mailto:tuihao.sauaga@gmail.com">tuihao.sauaga@gmail.com</a>
37.	Rev. Aporosa Rageci Fiji Baptist Convention Training	Suva, Fiji	E-mail: <a href="mailto:apobel@gmail.com">apobel@gmail.com</a>



## **Keep This Page**

### For Your Records and Planning

Detach, fill in the date below, and save this page as a record of when you submitted your application and to remind yourself of the next steps in the admissions process.

**Date you submitted your application:** \_\_\_\_\_

### **Wait for the decision of the CLTC Selection Committee**

If you are selected, we will notify you by phone and in writing. Otherwise, we will notify you by phone. If after one month of sitting for your entrance test you do not receive an answer, you may follow up by contacting the Admissions Office:

admissions@cltc.ac.pg OR +675 7456 6529 / 79087580 / 7637 0309

If you are selected, you will receive both an offer letter and a student confirmation form.

### **\*\*\*Beginning in 2025\*\*\***

With your student confirmation form, you will attach:

1. Proof that you have deposited 20% of your compulsory fees.
2. For the remaining 80%, any combination of:
  - a. Proof of any additional amount deposited.
  - b. A proposed payment plan.

If you expect sponsorship, you will attach:

3. A guarantee letter from the sponsor, or a copy of your application to that sponsor.

The Registrar must approve and sign your confirmation form, which you will give to the Dean of Students to obtain student housing.

### CLTC Education bank details

<b>Bank Name</b>	<b>BSP Bank</b>	<b>Westpac Bank</b>
<b>Branch Name</b>	Mt Hagen	Mt Hagen
<b>Account Name</b>	CLTC Education	CLTC IHE
<b>Account #</b>	100 522 9800	600 180 3621
<b>SWIFT Code</b>	BOSPPGPM	WPACPGPM
<b>BSB</b>	088307	038038