

Name:

Christian Leaders' Training College of Papua New Guinea





A Registered Institute of Higher Learning

Port Moresby Academic Administrator, Tarmari Fitakec pomcampus@cltc.ac.pg +675 7269 2951 & +675 7670 9463

APPLICATION FORM PORT MORESBY OPEN CAMPUS

Program for which you are applying (tick one)
ADVANCED DIPLOMA OF MINISTRY – 3 years. Prerequisite:Grade 12 or equivalent (for example, Grade 10 plus a 2-year certificate). Applicants who have completed relevant courses in another institution may be exempted from the first year.
DIPLOMA OF CHRISTIAN STUDIES – 1 year. Prerequisite: A non-theological diploma from an accredited institution (e.g., Diploma of Teaching) plus experience in their field of training.
BACHELOR OF THEOLOGY – 2 years. Prerequisite: A theological diploma with at least a B+ average from an accredited theological institution. Some applicants may be required to do the Diploma of Christian Studies as a bridging year.
GRADUATE DIPLOMA OF CHRISTIAN STUDIES – 1 year. Prerequisite: A non-theological degree from an accredited institution (e.g., Bachelor of Education) plus experience in their field of training.

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

Main appl	Church	Community	Health	Certificates	Work Exp	English
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Sit for your CLTC Entrance Test

Contact the Port Moresby Academic Administrator, or a CLTC Admissions Agent. (See the "CLTC Admissions Agents" section near the back of the application packet.) K50.00 non refundable fee will be paid before sitting for English Entrance Test.

Complete the following checklist
For you to complete
— "Applicant Information" 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 (Show your original during orientation)
Certificates / transcripts of education completed 1. Highest tertiary, secondary, or primary education 2. Any additional certificates or awards
Identification
 Copy of NID if you have it Otherwise copy of NID certificate or copy of a Bank Card.
Evidence of work experience
1. Reference letters, and/or
2. Curriculum vitae (CV)

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	Post Office	In Person
pomcampus@cltc.ac.pg	CLTC POM	CLTC Port Moresby
	PO Box 1619	Section 276, Lot 47
	Vision City, NCD 131	Pitpit Street
		North Waigani, NCD

School Fee - 2026

			Certificate & Advanced Certificate	Advance d Diploma & DCS	Bachelor & Graduate Diploma	Master of Theolog y
Tuition per credit	Class- room-	For Credit	K36	K46	K62	K78
(part-time students,	Based	Audit Only	K18	K23	K31	K39
including all open-campus		Mentoring & Practical	K18	K23	K31	N/A
students and those completing courses)	Field- Based	8-Week Practicum	N/A	K23	N/A	N/A

Applicant Information

		-ppiica	1116 11	11011	iiati		
Full name							
Date of birth (dd/mm/yy)				Phoi	ne bers		
Email				110111	DCI 5		
addresses							
Postal address							
(optional)				1			
Church				Den			
~				inati			
Country				Prov	ince		
District				War	d		
TT* 1 4 1 1	1	T T		NT.	c		
Highest school g completed	rade	Year		Name schoo			
				•			
Trade/college/un	niversity qualif	ication	Yea	ars	Nam	ne of school/college/university	
	• • • • • • • • • • • • • • • • • • • •		T 7		0	• 4•	
Work or ministr	ry position (full	l-time)	Yea	ars	Orga	anisation	
Other ministry	experience				Chu	rch or organisation	

Your Christian Experience and Life Goals 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? _____

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.

Signature	Date
ar	***Intentionally false statements will invalidate the application, and if found after admission will result in dismissal from the college.***
☐ I ha	we also completed the rest of this application truthfully.
_	ree to withdraw from my studies should I find myself unable to uphold the 'C lifestyle expectations.
☐ I ac	cept the lifestyle expectations as my own while I am a student at CLTC.
	we read the Community Lifestyle Commitment and understand the purpose mission of CLTC.

Church Endorsement 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? _____

What are they doing to help the church?	
How would you describe their characters, abilities, and potential?	_
Your Church's Endorsement	
Does your church endorse this individual's application to study at CLTC?	
If they are accepted, what amount of their compulory fees will the church contribute?	_
If accepted, in what other ways will your church support them during their studies?	
If accepted, what do you expect them to do after graduating from CLTC?	
Vour cianatura. Data.	
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 Applicants 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 po	tential?
What would be the benefit of this individual training at CI	LTC?
If they are accepted, what amount of their fees will the con-	mmunity contribute?
If accepted, in what other ways will your community supp	ort this person during their studies?
if decepted, in what other ways win your community supp	ort this person during their studies.
What else would you like to say?	
Your signature:	Date:
Your position in the community:	

Medical Section

Questions to answer about yourself

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.

What serious sicknesses or injuries have you had? What year and what kind?
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?
Are you willing to stop chewing betelnut, smoking, and drinking alcohol during the time you

Medical Form

Dea	ar Health Officer,						
	e person presenting this for ase assist us by providing t			hristian Lead	lers' Training	College. Co	ould you
Hei	ght:cm	Weight:	_ kg	Blood pres	sure:		
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	c illnes	ss?		Yes/No	
5.	Does the candidate have a (such as diabetes, epilepsy, as					Yes/No	
6.	Are there any issues from have ongoing implications		he can	didate has p	rovided that is	s of concer	n and could
8. 9. 10.	7. Is there any evidence that he/she chews or has habitually chewed betelnut? 8. Is there any evidence that he/she smokes or has habitually smoked tobacco? 9. Is there any evidence that he/she smokes or has smoked marijuana? 10. Is there any evidence that he/she is using or has used illegal drugs? Yes/No Yes/No 11. Is there any evidence that the candidate drinks alcohol? Yes/No						
If y	ou answered YES to any of	the above questions,	please	e give details	below.		
	Is the candidate fit and healthy and able to take part in study and work such as gardening, sport and general duties?						
Не	alth Officer's name						
Sig	nature						
Pro	ofessional role						
Da	te of examination						
Ph	one number		-				
Ad	dress						
	PLEASE AFFIX TH	E OFFICIAL STAMP OF	YOUR	HEALTH CEN	NTRE/FACILIT	Y/HOSPITA	AL

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INDIVIDUALS AND INSTITUTIONS AUTHORISED TO SUPERVISE THE CLTC ENTRANCE TEST

#	NAME	PROVINCE / COUNTRY	CONTACT
1.	Pastor Steven Angkaki	Western Province	Mobile: 7393 1585
	ECPNG	m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E-mail: steven.angkaki@gmail.com
2.	Joe Nitnit	Tabubil, Western Province	Mobile: 72676937
	Baptist	W. M. I. D.	E-mail: jnitnit@gmail.com
3.	Pastor Dacky Wakili	Western/Hela Provinces	Mobile: 7349 0582
	ECPNG Training Coordinator:		E-mail: dackywakili@gmail.com
4		W 1 B	ecpngshp@gmail.com
4.	Ronald Muna	Hela Province	Mobile: 70630041
_	Ambassador Bible College		E-mail: ronaldmuna40@gmail.com
5.	Mr. John Bakura	Hela Province	Mobile: 71215940
	Dauli Teachers College		E – mail: <u>bakurajohn20@gmail.com</u>
6.	Pastor Simil Hondolwa	Mendi Town, SHP	Mobile: 7363 4652
	CLTC Council member.		E-mail: ruthhondolwa@gmail.com
7.	Rev. Justin Wapu	Mendi SHP	Mobile: 72439944
	United Church		Email: jwapu74@gmail.com
8.	Admissions,	Simbu/ Jiwaka/ Enga/ Western	Mobile: 71617005
	CLTC Banz Campus	Highlands Provinces	E-mail: admissions@cltc.ac.pg
			Website: www.cltc.ac.pg
9.	Hanson Philip Gaiyer	Western Highlands Province	Mobile: 79094140
	BUPNG National Youth		Email: hansongaiyer777@gmail.com
	Co-ordinator		
10.	Nancy Dilu	Kundiawa, Simbu Province	Mobile: 79248116
	Church of the Nazarene		E-mail: dilunancy78@gmail.com
11.	Ps. Knose Akuri	Goroka, Eastern Highlands	Mobile: 72127065
	CLTC Campus	Province	E-mail: knoseakuri72@gmail.com
12.	Mike Saida	Goroka, Eastern Highlands	Mobile: 79327335
	Zogi Baptist Church	Province	E-mail: saidamike8@gmail.com
13.	Pastor Barrywan Tuwai	Wewak, East Sepik Province	Mobile: 7054 5203
	CBC Wewak	-	E-mail: cbcpngno@gmail.com
14.	Ps. Paul Simaure	Vanimo, West Sepik Province	Mobile: 71789077
	CBC	_	Email: psimaure2019std@gmail.com
15.	John Judah	Maprik, East Sepik Province	Mobile: 71023022
	Brugam Bible College		Email: samhundet59@gmail.com
	Gedisa Dawanan	Bulolo Wau	Mobile:70429752
16.	Impact Bible College		Gmail: gdawanan41@gmail.com
17.	Ps. Jerry Yabru	Madang Province	Mobile: 79658095
	Melanesian Evangelical Churches		Email: yabrumecocpng@gmail.com
	of Christ (MECOC)		
18.	Simon Minigamba	Morobe Lae	Mobile: 72748218/75910559
	Dean, CLTC Lae Campus		E-mail: sminigamba@cltc.ac.pg
19.	Jane Kipi	Morobe Lae	Mobile: 72167372
	CLTC Campus		Email: jkipi@cltc.ac.pg
20.	Rev. Geisa Panpan	Morobe Lae	Ph: 70464856
	ELC PNG		Email: gpanpan63@gmail.com
21.	Rev. David Nason	Milne Bay	Mobile: 74728019
	United Church	_	Email: davidknason@gmail.com
22.	Marcus Fitakec	Port Moresby, Central/NCD	Mobile: 77039617/ 79527007
	Dean, CLTC POM Campus	,	E-mail: mfitakec@cltc.ac.pg
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23.	Ruth Akia Administrator, CLTC POM Campus	Port Moresby, Central/NCD	Mobile: 7394 2384/ 75644565 E-mail: <u>rakia@cltc.ac.pg</u>
24.	Rev. Oscar Kuni United Church	Gulf Province	Mobile: 7328 6974 E-mail: oscarkuni92@gmail.com
25.	Pastor Andrew Kubwesan ECOM	Manus Province	E-mail: aakps29@gmail.com
26.	Ben Pia, Principal SSEC Gavuvu Bible College	Hoskins, West New Britain Province	Mobile: 7907 1987 E-mail: <u>bpsalu6@gmail.com</u>
27.	Charles Hausap SSEC	Hoskins, West New Britain Province	Mobile: 71973925 Email: charlesjameshausarp@gmail.com
28.	Peni Diave and Nellis Peni Association of Local Churches, Kinabot	Kokopo, East New Britain Province	Mobile: 71639618/ 72897968 E-mail: pdiave@pngpower.com.pg : penidiave7534@gmail.com
29.	Yada James United Church	New Ireland Province	Mobile: 70190276 Email: jamesyadah2@gmail.com
30.	Bill Hota Life Bible College United Church	New Ireland Province	Mobile: Email: anbhota@gmail.com
31.	Bishop Abraham Toroi United Church Regional Secretary	Buka, AroB	Mobile: E-mail: toroiabraham@gmail.com
32.	Rachael Haon	AroB	Mobile: 73703689 Email:
33.	Aaron Abia SSEC Theological Coordinator	Honiara, Solomon Islands	E-mail: aaronabia22@gmail.com
34.	Rolland Hopa UCSI Human Resource Desk	Munda, Solomon Islands	E-mail: hrdoffice.uc@gmail.com
35.	Karl Masing Lecturer, Talua Bible College	Port Vila, Vanuatu	E-mail: pskalmasing@gmail.com
36.	John Maite	Port Vila, Vanuatu	Email: johnmichaelmaite@gmail.com
37.	Rev. Dr. Ma'afu Palu	Tonga	E-mail: maafu.palu@gmail.com
38.	Pastor Tuifao Sauaga	Samoa	E-mail: tuifao.sauaga@gmail.com
39.	Rev. Aporosa Rageci Fiji Baptist Convention Training	Suva, Fiji	E-mail: apobel@gmail.com

Keeep 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 Port Moresby Academic Administrator, Tarmari Fitakec:

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 40% of your compulsory fees.
- 2. For the remaining 60%, 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 Port Moresby Academic Administrator must approve and sign your confirmation form before you enter the classroom.

CLTC Port Moresby Bank Details

Bank Name	Westpac Bank	
Branch Name	Waigani Branch	
Account Name	CLTC POM Campus Operating Account	
Account #	6001002770	