



Christian Leaders' Training College of Papua New Guinea

**Serving the Churches of the South Pacific Islands
– since 1965**

A Registered Institute of Higher Learning



Admissions Office admissions@cltc.ac.pg +675 7161 7005

2027 APPLICATION FORM POSTGRADUATE - MARRIED APPLICANTS

Wife's name: _____

Husband's name: _____

Note: If only one of you is accepted for this program, we will offer the other spouse a place in one of our other programs.

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. Students may also study part-time at the Port Moresby campus. We do not at this time offer online courses outside these two locations.

MTh Fees and Sponsorship- see pages 7.

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

Main appl.	Church	Community	Health	ID	Proj./Thesis	Certificates	Work Exp.	International

Complete the following checklist

For you to complete

- ☐ **Main application forms**

For you to start, and then remove for others to complete and return to you

- ☐ "Staff Development Confirmation Form"
- ☐ "Church Endorsement Form"
- ☐ "Community Endorsement Form"
- ☐ "Health Information Form"

For you to provide copies as supporting documents

(bring the original to registration)

- ☐ **Identification**
1. Copy of NIDs if you have it
 2. Otherwise copy of NID certificates or copy of a Bank Card.
- ☐ **Bachelor's final project or thesis (electronic copy)**
- ☐ **Documents of education and training completed**
1. Certificates of lower formal education levels.
 2. Certificate **and transcript** of bachelor and any higher degrees.
 3. Certificates of any additional training courses or workshops.
- ☐ **Evidence of work experience**
1. Reference letters, and/or...
 2. Curriculum vitae (CV)
- ☐ **International applicants**
- Copy of the bio-data page of your passport.

Submit all of the above documents

Email	MAF or Post Office	In Person
admissions@cltc.ac.pg	Admissions Officer Christian Leaders' Training College PO Box 45 Banz, Jiwaka Province 283 PAPUA NEW GUINEA	Admissions Officer CLTC Main Campus Sigiri Village Banz, Jiwaka Province

Sit for your CLTC Entry Exam

(if both spouses have at least Grade 10, both must sit the exam)

Pay your K50.00 (non-refundable) application fee to the Admission Officer or to your local CLTC Admissions Agent, and arrange a three-hour block of time with them to sit for your CLTC Entry Exam. (See the “CLTC Admissions Agents” section near the back of the application form.)

Wife's Information

Full name			
Date of birth (dd/mm/yyyy)		Phone numbers	
Email addresses			
Postal address (optional)			
Local church location		Denomination	
Country		Province	
District		Ward	

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

Paid work or ministry position	Years	Company/organization/church

Husband's Information

Full name			
Date of birth (dd/mm/yyyy)		Phone numbers	
Email addresses			
Postal address (optional)			
Local church location		Denomination	
Country		Province	
District		Ward	

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

Paid work or ministry position	Years	Company/organization/church

Wife's 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? _____

Husband’s 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.

- ☐ 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.

***Intentionally false statements will invalidate the application,
and if found after admission will result in dismissal from the college.***

Signature _____ Date _____

Children you intend to bring to CLTC

Children's names	Age	Grade

If any of the above children are adopted, you must attach one of the following:

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

2027 Student Fees

Local Leaders International provide a subsidy (LLI Sub) that covers the housing, food allowance, and medical portions of the fees.

Additionally, after successful completion of one year of study, some scholarship funds are available through the College.

	<i>Tuition</i>	<i>Housing</i>	<i>Child</i>	<i>Food Allowance</i>	<i>Medical</i>	<i>SRC</i>	<i>Property Bond</i>	<i>Total</i>	<i>LLI Sub</i>	STUDENT PORTION
Married, 0 children	13,200	5,800	0	4,800	200	40	400	24,440	10,800	13,640
Married, 1 child	13,200	5,800	560	6,000	250	40	400	26,250	12,050	14,200
Married, 2 children	13,200	5,800	1,120	7,200	300	40	400	28,060	13,300	14,760
Married, 3 children	13,200	5,800	1,680	8,400	350	40	400	29,870	14,550	15,320
Married, 4 children	13,200	5,800	2,240	9,600	400	40	400	31,680	15,800	15,880
Married, 5 children	13,200	5,800	2,800	10,800	450	40	400	33,490	17,050	16,440
Married, 6 children	13,200	5,800	3,600	13,200	500	40	400	36,740	19,500	17,240

Local Leaders International 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. In addition to the fees subsidy above, they aim to provide funds for:

1. Travel costs to and from CLTC (at the beginning and end of one's program)
2. School fees for children's education at local schools.
3. Some text books.

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

Staff Development Confirmation Form
*(optional for applicants who are sent by a Bible college or seminary
as part of their staff development)*

Applicants

Your name: _____ Program you are applying for: _____

Student portion of fees for 2027: _____

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 and title: _____

Name of institution: _____ Location: _____

Email address: _____ Phone number: _____

Optional – postal address: _____

For how many years have this individual 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 institution: _____

This page is intentionally left blank, to allow you to remove the following forms and give them to the appropriate person to complete.

Church Endorsement Form

Applicant

Your name: _____ Program you are applying for: _____

Fees for 2027: _____

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.

Representative Details

Your name (with title): _____

Location: _____ Name of church: _____

Email address: _____ Phone number: _____

Optional – postal address: _____

Representative 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 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? _____

Representative signature: _____ **Date:** _____

Position in the church: _____

Community Reference Form

Applicant

Your name: _____ Program you are applying for: _____

Fees for 2027: _____

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.

Leader Details

Name (with title): _____

Location: _____ Name of community: _____

Email address: _____ Phone number: _____

Optional – postal address _____

Leader's 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 potential? _____

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

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

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

What else would you like to say? _____

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 councilor or government official.

First Referee

Name: _____

Occupation: _____

Relationship to you: _____

Email: _____

Phone numbers: _____

Second Referee

Name: _____

Occupation: _____

Relationship to you: _____

Email: _____

Phone numbers: _____

This page is intentionally left blank, to allow you to remove the following Health Information Form and give it to health officer to complete.

Health Information Form

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 on the next page.

Questions to answer as a couple

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

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

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

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

(For couples with children) concerning children who will come with you

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

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

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

Wife

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? Yes/No
(such as diabetes, epilepsy, asthma, heart condition)
6. Are there any issues from the medical history the candidate has provided 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.

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

Health Officer's name		
Signature		
Professional role		
Date of examination		
Phone number		
Address		
PLEASE AFFIX THE OFFICIAL STAMP OF YOUR HEALTH CENTRE/FACILITY/HOSPITAL		

Husband

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: _____

12. Does the candidate have a visual impairment? Yes/No
13. Does the candidate have a hearing impairment? Yes/No
14. Does the candidate have a physical disability? Yes/No
15. Does the candidate have a history of psychiatric illness? Yes/No
16. Does the candidate have a chronic illness? Yes/No
(such as diabetes, epilepsy, asthma, heart condition)
17. Are there any issues from the medical history the candidate has provided that is of concern and could have ongoing implications? Yes/No
18. Is there any evidence that he/she chews or has habitually chewed betelnut? Yes/No
19. Is there any evidence that he/she smokes or has habitually smoked tobacco? Yes/No
20. Is there any evidence that he/she smokes or has smoked marijuana? Yes/No
21. Is there any evidence that he/she is using or has used illegal drugs? Yes/No
22. 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.

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

Health Officer's name		
Signature		
Professional role		
Date of examination		
Phone number		
Address		
PLEASE AFFIX THE OFFICIAL STAMP OF YOUR HEALTH CENTRE/FACILITY/HOSPITAL		

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**Remove these pages and keep for your reference.
Submit only Pages 1-20 to the Admissions Officer.**

CLTC Admissions Agents

NAME	PROVINCE / COUNTRY	CONTACT
Pastor Steven Angkaki ECPNG	Western Province	Mobile: 7393 1585 E-mail: steven.angkaki@gmail.com
Ps. Abel Wayongi Baptist	Tabubil, Western Province	Mobile: E-mail: abelwayongi01@gmail.com
Pastor Dacky Wakili ECPNG Training Coordinator:	Western/Hela Provinces	Mobile: 7349 0582 E-mail: dackywakili@gmail.com ecpngshp@gmail.com
Ronald Muna Ambassador Bible College	Hela Province	Mobile: 70630041 E-mail: ronaldmuna40@gmail.com
Mr. Moses Bakura Dauli Teachers College	Hela Province	Mobile: 76739316 E – mail: bakurajohn20@gmail.com
Pastor Simil Hondolwa CLTC Council member.	Mendi Town, SHP	Mobile: 7363 4652 E-mail: ruthhondolwa@gmail.com
Rev. Justin Wapu United Church	Mendi SHP	Mobile: 72439944 Email: jwapu74@gmail.com
Admissions, CLTC Banz Campus	Simbu/ Jiwaka/ Enga/ Western Highlands Provinces	Mobile: 71617005 E-mail: admissions@cltc.ac.pg Website: www.cltc.ac.pg
Hanson Philip Gaiyer BUPNG National Youth Co-ordinator	Western Highlands Province	Mobile: 79094140 Email: hansongaiyer777@gmail.com
Nancy Dilu Church of the Nazarene	Kundiawa, Simbu Province	Mobile: 79248116 E-mail: dilunancy78@gmail.com
Ps. Knose Akuri CLTC Centre - Goroka	Goroka, Eastern Highlands Province	Mobile: E-mail: knoseakuri72@gmail.com
Mike Saida Zogi Baptist Church	Goroka, Eastern Highlands Province	Mobile: 79327335 E-mail: saidamike8@gmail.com
Pastor Barrywan Tuwai CBC Wewak	Wewak, East Sepik Province	Mobile: 7054 5203 E-mail: cbcpngno@gmail.com
Joseph Mango Green River Sec. School	Vanimo, West Sepik Province	Mobile: 71310332 Email:
Ps. Paul Simaure CBC – Vanimo Green	Vanimo, West Sepik Province	Mobil: 71789077 Email: psimaure2019std@gmail.com
John Judah Brugam Bible College	Maprik, East Sepik Province	Mobile: 71023022 Email: samhundet59@gmail.com
Gedisa Dawanan Impact Bible College	Bulolo Wau	Mobile: 70429752 Gmail: gdawanan41@gmail.com
Ps. Jerry Yabru Melanesian Evangelical Churches of Christ (MECOC)	Madang Province	Mobile: 79658095 Email: yabrumecocpng@gmail.com

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Submit only Pages 1-20 to the Admissions Officer.**

Simon Minigamba Dean, CLTC Lae Campus	Morobe Lae	Mobile: 72748218/ 75910559 E-mail: sminigamba@cltc.ac.pg
Rev. Geisa Panpan – ELC	Morobe Lae	Ph: 70464856 Email: gpanpan63@gmail.com
Rev. David Nason United Church	Milne Bay	Mobile: 74728019 Email: davidknason@gmail.com
Marcus Fitakec Dean, CLTC POM Campus	Port Moresby, Central/NCD	Mobile: 77039617/ 79527007 E-mail: mfitakec@cltc.ac.pg
Ruth Akia Administrator, CLTC POM Campus	Port Moresby, Central/NCD	Mobile: 7394 2384/ 75644565 E-mail: rakia@cltc.ac.pg
Rev. Oscar Kuni United Church	Gulf Province	Mobile: 7328 6974 E-mail: oscarkuni92@gmail.com
Pastor Andrew Kubwesani ECOM	Manus Province	E-mail: aakps29@gmail.com
Ben Pia, Principal SSEC Gavuvu Bible College	Hoskins, West New Britain Province	Mobile: 7907 1987 E-mail: bpsalu6@gmail.com
Charles Hausap SSEC	Hoskins, West New Britain Province	Mobile: 71973925 Email: charlesjameshausarp@gmail.com
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
Yada James United Church	New Ireland Province	Mobile: 70190276 Email: jamesyadah2@gmail.com
Bill Hota Life Bible College United Church	New Ireland Province	Mobile: Email: anbhota@gmail.com
Gordon Kevon Bougainville Power Limited. United Church	Buka, AroB	Mobile: 72086874 E-mail: gkgordonkevon12@gmail.com Email : grdnkevon@gmail.com
Rachelle Haon	AroB	Mobile: 73703689 Email:
Steven Boas Onepusu Bible College	Honiara, Solomon Islands	Mobile: +677 788 7239
Aaron Abia National Theological Coordinator SSEC Head Office	Honiara, Solomon Islands	E-mail: aaronabia22@gmail.com
Karl Masing Lecturer, Talua Bible College	Port Vila, Vanuatu	E-mail: pskalmasing@gmail.com
John Maite	Port Vila, Vanuatu	Email: johnmichaelmaite@gmail.com
Rev. Dr. Ma'afu Palu	Tonga	E-mail: maafu.palu@gmail.com
Pastor Tuifao Sauaga	Samoa	E-mail: tuifao.sauaga@gmail.com
Rev. Aporosa Rageci Fiji Baptist Convention Training	Suva, Fiji	E-mail: apobel@gmail.com

**Remove these pages and keep for your reference.
Submit only Pages 1-20 to the Admissions Officer.**

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 71617005

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

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 also will attach:

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

CLTC Education bank details

Bank Name	BSP Bank	
Branch Name	Mt Hagen	
Account Name	CLTC Education	
Account #	100 522 9800	
SWIFT Code	BOSPPGPM	
BSB	088307	