

MISSION STATEMENT

Impelled by the Catholic faith and the Dominican mission, Aquinas Institute of Theology educates men and women to preach, to teach, to minister, and to lead.

VISION STATEMENT

Aquinas Institute of Theology envisions the hope-filled participation of the faithful in the Church. We are a Roman Catholic graduate school of theology and ministry animated by an eight-hundred-year Dominican tradition of study in the pursuit of truth. We are a community of scholars and ministers striving to witness to the Gospel of Jesus Christ as we pursue theology for the life of the Church and the world.

We commit our gifts in service to the Church and world as a center for:

- scholarship and theological reflection;
- collaborative lay, religious, and ordained ministry;
- initial formation for the Dominican friars of the Province of St. Albert the Great and for other religious communities;
- preaching education;
- leaders stewarding the mission of Catholic institutions;
- adult faith formation.

As a community we seek to be transformed by a spirit of holiness and by faithful engagement with the living tradition of the Church. We eagerly invite others to share our vision and mission.

In a suffering world we believe that God's Word is alive and active. In response we say, "Here we are, God, send us."

APPLICATION PROCESS

A completed application for admission to Aquinas Institute of Theology is comprised of Part I and Part II.

- Part I includes the application form, application fee, transcripts, three letters of recommendation, MAT results, and an interview with the admissions director.
- Part II requires you to write two brief reflective essays.

PRIORITY DEADLINES for APPLICATION FOR ADMISSION and FINANCIAL AID*

- March 15 for the Fall Semester
- November 15 for the Spring Semester

All materials should be forwarded to:

Admissions Office, 23 South Spring Avenue, St. Louis, MO 63108

314-256-8806 • 800-977-3869 • admissions@ai.edu

* Contact the Admissions Office for information on financial aid, scholarships, and loans:
314-256-8806 or 800-977-3869.

PART I

Please submit:

1. A completed Application for Graduate Admissions

2. Non-refundable application fee of \$50

3. **Official transcripts** of all undergraduate and graduate coursework either sent directly from the institution or included in a sealed envelope with registrar's signature across the seal (request form included for your convenience).

4. Three letters of recommendation (forms included for your convenience)

[Only one letter of recommendation required for Non-degree seeking students]:

- At least one letter from each of the three reference areas: academic, ministerial and personal reference. These should be sent directly from the recommender or included in a sealed envelope with recommender's signature across the seal.
- **APPLICANTS FROM RELIGIOUS ORDERS:** One of these letters should be from your religious superior.

5. Results of the Miller Analogies Test or Graduate Record Examination *[Not required for Non-degree seeking students]:*

- Those degree seeking students that have studied theology at the graduate level or have a post baccalaureate degree in theology are exempt.
- Those degree seeking students that have a post-baccalaureate degree in another area of concentration can request that this test be waived (see page 6 of this application).
- GRE test scores will be accepted if taken within the past 7 years.

6. Interview

Applicants are asked to schedule an interview with the admissions director. For applicants from out of town this interview may be done by phone.

7. International Applicants

- Proficiency in the English language is required. If English is not your primary language, a TOEFL certificate of proficiency in English should be sent to the Director of Admissions. All four parts of the computer-based test are preferred. When taking the paper-based test, include the Test of Written English (TWE). Computer-based TOEFL score must be 213; paper-based score must be 550. The TOEFL iBT score must be 79/80.
- Those who take the TOEFL need not take the MAT or GRE.
- International students must provide evidence of financial support for the duration of their studies in accord with U.S. Immigration Regulations. Please contact the director of admissions for a financial support verification form.

PART II

Written essays

1. Personal Assessment. *[Not required for Non-degree seeking students]*

The Personal Assessment is an important part of your application for admissions to Aquinas Institute of Theology. It should not exceed 1,000 words. Use the essay to

- Articulate your vocational goals, intellectual and pastoral interests,
- Assess your personal strengths and weaknesses for theology and ministry,
- Note theological and ministerial questions that spark your interest and may offer insight into your reasons for applying to Aquinas Institute of Theology.

2. A maximum 700-word essay reflecting on a quotation from “Wellspring of Hope,” a chapter in *Sing a New Song* (Templegate, 1999), by Fr. Timothy Radcliffe, O.P.

Please select any one of the following quotes:

- a. “Study is a way to holiness, which opens our hearts and minds to each other, builds community and forms us as those who confidently proclaim the coming of the Kingdom.” (page 54)
- b. “The intellectual discipline of our study has this ultimate purpose, to bring us to this moment of conversion when our false images of God are destroyed so that we may draw near to the mystery.” (page 64)
- c. “We can never say an illuminating word about God unless we do theology differently, uncompetitively and with reverence. One cannot do theology alone.” (page 70)

Your essay should address the following questions:

- What does this quote mean to you?
- What do you find challenging about this quote?
- What do you find comforting?
- What can this quote mean in your community and/or ministerial context?

PERSONAL INFORMATION

Title: _____

Name
Last Name (Surname) _____ *Maiden* _____ *First* _____ *Middle* _____

Permanent Address
 _____ *Street* _____ *City* _____ *State* _____ *Zip* _____

Mailing Address (if different from above)
 _____ *Street* _____ *City* _____ *State* _____ *Zip* _____

Telephone: Home () _____ Work () _____ Cell () _____

Email _____ Social Security Number _____
(Your social security number will be kept confidential.)

Semester you plan to begin studies at Aquinas Institute: Fall Spring Summer Year:

I plan to attend on a part-time full-time basis.
 (A minimum of 12 credit hours for M.Div. & MAPS programs or 9 credit hours for MA program is considered full-time enrollment. All D.Min. students are considered full time enrollees. Members of all other cohorts are part time students.)

I need information on housing: Yes No

How do you plan to finance your education?

I need financial aid applications for: Aquinas Institute Aid Federal Loans

Have you applied to Aquinas Institute of Theology previously? No Yes, when?

I wish to enroll as a candidate for:

- Non-Degree Study
- Graduate Certificate* Biblical Studies Pastoral Care Thomistic Studies
- Master of Arts in Theology (MA)
- Master of Arts in Pastoral Ministry (MAPM)
- Master of Arts in Pastoral Studies (MAPS)
- Master of Divinity (M.Div.)
- Dual Master of Arts in Pastoral Studies/Master of Social Work (MAPS/MSW)
(requires concurrent application to St. Louis University)
- Dual Master of Arts/Master of Divinity (M.Div./MA)
- Master of Arts in Sacred Music
(requires concurrent application to Webster University)

My special area of interest is:

- Biblical Studies
- Historical Studies
- Liturgical Studies
- Moral Theology
- Pastoral Care
- Spiritual Direction
- Spirituality
- Systematic Theology

* The Certificate in Spiritual Direction is a separate application.

Please check all that apply:

(The information in this section is collected for statistical purposes and will not be used in determining your eligibility for admission. Information provided about ethnicity is voluntary.)

Non-Resident Alien Asian Native Hawaiian or other Pacific Islander
 Black or African American Hispanic American Indian or Alaskan Native
 White Further Self-Identification

Please check all that apply:

Female Male Married Single
 Priest Seminarian Minister Vowed Religious Lay

Place of Birth Date of Birth Country of Citizenship
 Religious Denomination Parish/Congregation Diocese

Ordained? No Yes: Date of Ordination Place

For Clergy: Please indicate your diocese/order/synod, etc.

Spouse's Name (if applicable)

If you are not a citizen of the United States, what type of visa will you have at the beginning of the semester?

F-1 Student Visa R-1 Religious Visa B Visitor Visa Permanent Resident Other

Alien Registration Number

TESTING INFORMATION

MAT/GRE Scores *(Does not apply to Non Degree and International Students. This score is considered unofficial until score is sent directly by the testing center. Please request that official results are sent directly to AI. Our MAT institutional number 2110)*

Date Taken: Scheduled Date:

I request a waiver from the MAT because I have earned a post-baccalaureate degree from an accredited institution and hereby submit supporting transcript.

INTERNATIONAL APPLICANTS:

Is English your first language? Yes No

If no, then please state your first language:

TOEFL Score *(This score is considered unofficial until score is sent directly by the testing center.)*

EDUCATIONAL BACKGROUND

Colleges/Graduate Schools Attended

College/University	Field of Study	Dates of Enrollment	Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT/PROFESSIONAL BACKGROUND

Place of Employment	Dates	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Present Position

REFERENCES

Individuals who will be writing letters of recommendation for you:

Name _____ Occupation _____
 Address _____ Email _____
 City _____ State _____ Zip _____ Phone _____
 This letter of recommendation is: Academic Ministerial Personal Other

Name _____ Occupation _____
 Address _____ Email _____
 City _____ State _____ Zip _____ Phone _____
 This letter of recommendation is: Academic Ministerial Personal Other

Name _____ Occupation _____
 Address _____ Email _____
 City _____ State _____ Zip _____ Phone _____
 This letter of recommendation is: Academic Ministerial Personal Other

Signature _____

Date _____

[Submit Button/Link on page 10](#)

INFORMATIONAL DATA



In order to assess our communication methods, we would appreciate your response to the following questions:

How did you first learn about Aquinas Institute of Theology?

Personal contact: Aquinas Alum Aquinas Student Aquinas Professor Pastor Other

Advertisement: National Catholic Reporter America Commonweal Christian Century Diocesan Paper
Parish Bulletin Radio TV Other

Website: Aquinas Website Other Website(s) Search Engine: *Phrase used to search:*

Publication: Aquinas Newsletter or Magazine Aquinas Brochure Other

Workshop/Seminar:

Other - please specify:

Which of the following prompted you to apply to Aquinas Institute of Theology? Please indicate all that pertain.

- Aquinas admissions staff Name:
- Aquinas program director or faculty Name:
- An alumna/alumnus of Aquinas Institute Name:
- A friend or associate (non-alumni) Name:
- Priest, sister, layperson in pastoral ministry Name:
- A campus visit
- Affordability
- Program format
- Reputation of Aquinas Institute of Theology
- Mailing I received from Aquinas
- Someone else's reputation/referral Name:
- Faculty member of another school Name:
- Endorsement by bishop/superior/pastor Name:
- Other:

Please offer other input that may be helpful for us in this context. Thank you.

[Submit Button/Link on page 10](#)

**APPLICATION CAN BE PRINTED AND MAILED
OR SUBMITTED ELECTRONICALLY
PLEASE VERIFY ALL ENTERED DATA
PRIOR TO SUBMITTING APPLICATION**

**THIS PAGE IS LEFT BLANK INTENTIONALLY
FOR COLLATING PURPOSES.**

LETTER OF RECOMMENDATION



Admissions Office
23 South Spring Avenue
St. Louis, MO 63108
Phone 314.256.8806 Fax 314.256.8888
admissions@ai.edu

To Be Filled in by the Applicant

Applicant's Name

Intended Program

Name of Person to Make Recommendation:

is being asked to

make an assessment of the applicant as a(n): Academic Ministerial Personal Other reference.

Waiver: I hereby waive my right to examine at any future time this Letter of Recommendation, which I understand will become part of my Admission File at Aquinas Institute.

Signature of Applicant

Date

THE APPLICANT IS FREE TO SIGN OR NOT TO SIGN THIS WAIVER. If the waiver is not signed, Aquinas Institute must make the recommendation available to the applicant upon proper written request.

To Be Completed by the Person Recommending the Applicant

The above-named person is applying for admission to Aquinas Institute of Theology, a graduate school of theology and ministry. We request your candid appraisal of the applicant's capacity for graduate theological and ministerial education. After completing the form you may either mail it directly to the admissions office or return the letter in a sealed envelope, with your signature over the back flap, to the applicant so they can submit it with their application. (NOTE: If the waiver has not been signed by the applicant, you should not consider this recommendation to be confidential.)

1. How long have you known the applicant?

2. What is your relationship to the applicant?

3. Please check the boxes to indicate your assessment of the applicant's:

	1 (BELOW)	2	3 (AVERAGE)	4	5 (ABOVE)	NOT OBSERVED
Moral Character						
Emotional Maturity						
Leadership Capacity						
Work Habits						
Study Habits						
Intellectual Curiosity						
Demonstrates Self-Reflection						
Humble and Open to Other Points of View						
Able to Listen						
Qualified to Complete a Graduate Degree						

4. What is your overall assessment of the applicant's ability to work collaboratively with others?

5. What is your overall assessment of the applicant's ability to make meaningful connections between theological ideas and concrete life situations?

Is there something else you would like to share about this candidate? *(Please attach on a separate piece of paper.)*

I highly recommend recommend recommend with reservation do not recommend the above candidate for graduate theological studies at Aquinas Institute of Theology. *(Please attach reasons for reservations or not recommending.)*

Signature of Person Recommending the Applicant

Date

Complete Mailing Address

Phone Number

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Signature of Person Recommending the Applicant

Date

Complete Mailing Address

Phone Number

TRANSCRIPT REQUEST

Date

Dear Registrar:

Please send the transcript of:

Full Legal Name

Former or Maiden Name:

Current Address

City

State

Zip

Social Security Number

Date of Birth

Year(s) graduated/attended

Degree Program

Please mail 1 (one) official copy immediately to:

Office of Admissions

Aquinas Institute of Theology

23 South Spring Avenue

St. Louis, MO 63108

Please find enclosed the fee of _____ for the transcript request.

Purpose of the transcript request is for further education.

Signed by _____

Date _____

Phone *(if needed for clarification)*