

# Application for Admission

## Certificate in Byzantine Music

**Holy Cross  
Greek Orthodox  
School of Theology**  
50 Goddard Avenue  
Brookline, MA 02445

Toll Free 866-424-2338  
Tel. 617-850-1260  
Fax. 617-850-1460  
www.hchc.edu  
admissions@hchc.edu

### PERSONAL DATA

Year Intended Enrollment: \_\_\_\_\_ SS# \_\_\_\_\_

How did you find out about the Certificate in Byzantine Music? \_\_\_\_\_

Legal Name: \_\_\_\_\_ Gender  Male  Female  
Last/Family First Middle (Jr. etc)

Prefer to be called: \_\_\_\_\_ (Nickname) Former Name(s) \_\_\_\_\_

Home Address: \_\_\_\_\_

Number and Street  
 \_\_\_\_\_  
 City/Town State/Province/Country Zip/Postal Code

Best Telephone # to reach you: \_\_\_\_\_ Email address: \_\_\_\_\_  
(Area code)-number

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
City/Town State/Province Country

If different from above, please give a mailing address for correspondence.

Mailing Address: \_\_\_\_\_

Number and Street  
 \_\_\_\_\_  
 City/Town State/Province/Country Zip/Postal Code

Citizenship:  USA  Dual citizenship-USA and (please specify other): \_\_\_\_\_  
 USA Permanent Resident Visa-Citizen of: \_\_\_\_\_

Marital Status:  Single  Married  Separated  Divorced  Widowed  Other \_\_\_\_\_

Spouse's Full Name: \_\_\_\_\_

Please give the names and ages of your children: \_\_\_\_\_

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

### EDUCATIONAL DATA

INSTITUTION	LOCATION	DATES		DEGREE RECEIVED OR EXPECTED
		FROM	TO	

Honors or scholastic achievements: \_\_\_\_\_

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

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## WORK EXPERIENCE

List any job that you have held during the past five years.

Specific nature of work	Employer	Dates of employment	Number of hours per week

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## CHURCH INFORMATION

Orthodox Jurisdiction: \_\_\_\_\_ Other: \_\_\_\_\_

Home Parish: \_\_\_\_\_ City, State: \_\_\_\_\_

Parish Priest: \_\_\_\_\_ Metropolis/Diocese: \_\_\_\_\_

Date of Reception into the Orthodox Church: \_\_\_\_\_  By Baptism  By Chrismation  Other \_\_\_\_\_

Parish, City, State of Reception \_\_\_\_\_

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## CERTIFICATION

"I certify that the information provided on this application is accurate, complete, and honestly presented. I understand that any inaccurate or misleading information or omission will be cause for disqualification from further consideration for admission and will be cause for the rescinding of any offer of admission, or for discipline, dismissal, or revocation of degree if discovered at a later date."

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_