Please ensure all sections are completed fully, clearly, and in BLOCK CAPITALS

PERSONAL INFORMATION

Title (Mr/Ms/Other) .............................................. Male ☐ Female ☐
All first names ...............................................................................................
(As shown on passport)
Last name ......................................................................................................
(As shown on passport)
Preferred name for name badge (One first name and one last only)
...........................................................................................................................
Date of birth   Day..................  Month...................  Year..................
(eg 25 Dec 1990)
Nationality (As shown on passport) ..........................................................
Do you hold an EU passport?   ..................................... Yes ☐ No ☐
Street address  ..............................................................................................
Town ...............................................................................................................
Region/state ..................................................Postal code ..........................
Country ...........................................................................................................
Email ..................................................................................................................
Telephone (Home) ..........................................................................................
Telephone (Daytime).......................................................................................
Occupation.....................................................................................................

EMERGENCY CONTACT

Name..............................................................................................................
Relationship....................................................................................................
Telephone (Home) ..........................................................................................
Telephone (Daytime).......................................................................................

ACADEMIC RECORD

Current study

<table>
<thead>
<tr>
<th>University</th>
<th>Degree</th>
<th>Subject</th>
<th>Date expected (month and year)</th>
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Previous study

<table>
<thead>
<tr>
<th>University</th>
<th>Degree</th>
<th>Subject</th>
<th>Date received (month and year)</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Are you currently a student of the Graduate Theological Foundation?  Yes ☐ No ☐

DISABILITY

Do you have a disability or long-term medical condition?

☐ Yes (please tick all that apply)
☐ A specific learning disability such as dyslexia, dyspraxia or AD(H)D
☐ General learning disability (such as Down's syndrome)
☐ A social/communication impairment such as Asperger’s syndrome/other autistic spectrum disorder
☐ A long standing illness or health condition such as cancer, HIV, diabetes, epilepsy, chronic fatigue syndrome, etc
☐ A mental health condition such as depression, anxiety, bipolar disorder, etc
☐ A physical impairment or mobility issues
☐ Deaf or serious hearing impairment
☐ Blind or serious visual impairment uncorrected by glasses (please specify).............................................................
☐ A disability, impairment or medical condition not included above (please specify)...........................................................
☐ Prefer not to say
☐ No known disability ☐ Prefer not to say

SEMINAR CHOICES

Participants take one morning seminar and one afternoon seminar per week. We will try to place you in your first or second choices, though in some cases allocations to third choices will have to be made. Please rank the seminars 1-3 in order of preference for each session, with 1 being your first choice and 3 your third choice.

Week 1: Morning
John’s Gospel: Going Deeper into the Mystery
Mary Magdalen: Penitent or Preacher?
Sacrifice and the Death of Christ

Week 1: Afternoon
Compassion in Care
Martyrdom, Praise and Other Sacrifices
Trauma, Resilience and the Bible

Week 2: Morning
Discipleship and Sacrifice in Lewis, Tolkien and Williams
Sacrifice in Liturgy and Life
Sacrificial Love: Searching for Unselfish Holiness

Week 2: Afternoon
How Should We Think of God’s Work in Christ?
Science and the Sacraments
The Suffering Self

Oxford University
Theology Summer School 2019
Please ensure all sections are completed fully, clearly, and in BLOCK CAPITALS

RESIDENTIAL STATUS

Residential  £1,310 per week □
Non-residential (no accommodation)  £970 per week □

DIETARY REQUIREMENTS

The following special diets are available but only if requested in advance

- □ Vegan
- □ Vegetarian
- □ Fish-eating vegetarian
- □ Gluten-free
- □ Non-dairy
- □ Food allergy
- □ Halal
- □ No fish
- □ No shellfish
- □ No fish or shellfish
- □ No nuts

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- □ No shellfish
- □ No fish or shellfish
- □ No nuts

ETHNIC ORIGIN

Please describe your ethnic origin

- □ White – British
- □ White – Irish
- □ Other white background (please specify)
- □ Gypsy or Traveller
- □ Arab
- □ Mixed White and Black (please specify below)
  - □ Caribbean
  - □ African
- □ Mixed White and Asian
- □ Other mixed background (please specify)
- □ Black or Black British (please specify below)
  - □ Caribbean
  - □ African
- □ Other black background (please specify)
- □ Asian or Asian British (please specify below)
  - □ Indian
  - □ Pakistani
  - □ Bangladeshi
- □ Chinese
- □ Other Asian background (please specify)
- □ Any other ethnic background (please specify)
- □ Prefer not to say

APPLICATION CHECKLIST

Your application should include the following documents (please tick the boxes to confirm they are enclosed):

- □ Application form
- □ Personal statement
- □ Evidence of English language competency (non-native speakers of English only)
- □ Letter of recommendation

Please note that past participants are not required to submit a further letter of recommendation

- □ Passport-sized photographs (4.5cm high x 3.5cm wide)
  - Four if applying for one week; six if applying for both weeks

Please note that incomplete applications will not be considered

Post to: Theology Summer School, OUDCE, 1 Wellington Square, OXFORD, OX1 2JA, UK

MARKETING AND DATA PROTECTION

How did you find out about the Theology Summer School?

Select one option only

- □ I am a past participant in this summer school
- □ I last attended in (year) ..................................................
- □ Internet search
- □ Which search terms did you use? ....................................
- □ Link from another website
- □ Which? ...........................................................................
- □ Advert or listing; blog or article; social media
- □ Which and where? ..............................................................
- □ Personal recommendation
- □ From whom? ................................................................
- □ Referred by an educational institution or organisation
- □ Which? .............................................................................

Information collected on this form will be held in accordance with the provisions of the General Data Protection Regulations (GDPR) for the purposes of processing your application and for student administration. It will be held securely and not passed on to third parties. For details, see our privacy policy at www.conted.ox.ac.uk/about/privacy-policy

- □ Yes – please keep me informed about Oxford Continuing Education courses, events, news, research and student information by email

DECLARATION

I certify that the information given in this application is complete and accurate to the best of my knowledge. If my application is successful and I accept an offer of a place on the Theology Summer School 2019 I accept responsibility for payment of the full fees in accordance with OUDCE’s ‘Terms and Conditions for entry in 2018–19 for selective short courses (by application only)’ and I agree to abide by OUDCE’s ‘Disciplinary regulations’ (both of which are detailed at www.conted.ox.ac.uk/about/terms-and-conditions).

Subject to English law

Signature.................................................................

Date.............................................................................