Application Form: Bachelor of Divinity



Student Registry

Private and Confidential

Email: degreecongregations@admin.cam.ac.uk

1	Surname (Family Name)			Title	
	Sumaine (Failing Name)	Forenames		The	
2	Address			email	
3	Date of Birth	4 Telephone number		5 College	
6	Degrees held				
	ersity awarding Degree	Title of Degree	Date De	gree Conferred	
•			2 410 2 0	3	
7	The Faculty or other institution with	a Degree Committee with whic	n you co	nsider the subject of	
	your contribution to scholarship is			-	
8	Please list the dates your degree(s)	was conferred at Cambridge:			
0	Flease list the dates your degree(s)	was comerred at cambridge.			
9	Have you submitted a previous app	lication for the Bachelor of Divir	nity? If y	ou have, please show	
	the date of application:				
10	Are you submitting a list of publishe	ed works and/or a thesis for exa	mination	?	
	Are you outsinking a not of publish				

11 List of published works on which your application for the Bachelor of Divinity is based (if									
appropriate):									
Serial No of work	Author(s)	Publisher	Full title of work	Date of publication and full reference of work	Extent of applicant's contribution to				
					work				
12 I confirm that the information which I have given in this application is complete and true and I enclose the appropriate fee									
Signature:			Printed Name:	Date:					

What to do now:

• Send 2 copies of this form to: Degree Congregations, Student Registry, Student Services Centre, New

Museums Site, Cambridge CB2 3PT with:

- two copies of each of the published works specified on the list above
- a Declaration Form
- payment of £360 in the form of a cheque payable to 'University of Cambridge' or to make a BACS payment, email FFinvoices@admin.cam.ac.uk