

H. Milton Haggard Center for New Testament Textual Studies NOBTS Student Assistantships for the HCNTTS

1. Applicant

Applicant Name _____

Mailing Address _____

E-Mail Address _____

Phone: Office/Home/Cell _____

Academic Degrees/year granted

Church Information: (where you are a member)

Church Name _____

Your Position _____

Years at Current Position _____

Time commitment in the church setting:

Hours per week (average) _____

Is the church agreeable for you to work in the HCNTTS?

Yes

No

Unsure

Other employment or major time commitments:

2. Assistantship Category (Check one.)

Ph.D. Student

M.Div. or M.A. Student

Special Student pending Ph.D. admission

Other

3. Assistantship Level (Filled by the director)

Short-term research aid (amount varies, based on the project needs)

12 to 15 hours per week (\$500/month, semester renewable)

20 to 25 hours per week (\$1000/month, semester renewable)

Other (Requires direct approval by the Center director.)

4. Financial Resources

a. Release Statement

I understand that this application will be reviewed by the decision-making body for this assistantship.

I hereby agree that this information can be used for the purpose of making a decision regarding this assistantship request (and only for that purpose).

b. Income sources and needs (attached a separate page with this information)

(1) During your time of study at NOBTS, please list the sources of your work income outside of this assistantship from NOBTS especially. This should include NOBTS income and scholarships as well as church work income.

(2) Explain why you desire this assistantship and why you wish to work at the HCNTTS and your overall academic interests in textual criticism.

5. Agreement with Seminary Policies

a. Seminary Policies

Please read the seminary policies for those studying at the seminary and staying on the campus of the seminary.

These can be accessed at the seminary website, www.nobts.edu, where the policies are included in the seminary catalogue available there in pdf format.

Anyone working at the HCNTTS must agree to abide by these policies while working or doing research at the HCNTTS. Your signature below attests to your agreement to abide by these policies.

b. Signature signifying your agreement and request for consideration for this assistantship

I state and attest that:

I have reviewed the information and policies indicated above and agree to abide by them as a requirement of this assistantship.

To the best of my knowledge, no untrue statement of a material fact is contained in this Application Package, and no omission related to my ethical and moral practices has been made. This includes, but is not limited to, sanctions and ethical breaches in my present and past settings.

Date _____

Signature _____

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NOBTS Student Assistantship for the HCNTTS**

6. References and Work Interest

a. Name of your current or most recent employer:

Name _____
 Contact Person _____
 Address _____
 Phone _____
 E-mail _____

b. Statement of Work Interest

Please attach a statement giving your reasons for wanting to work at the HCNTTS. Also, be sure to list and explain any special talents or abilities that you bring to the job setting.

c. Additional References

Please give the names of three additional references who can validate the following:

Your capabilities
 Your prior training in Greek and NT TC
 Your work history

1. Name _____
 Position _____
 Address _____
 Phone _____
 E-mail _____

2. Name _____
 Position _____
 Address _____
 Phone _____
 E-mail _____

3. Name _____
 Position _____
 Address _____
 Phone _____
 E-mail _____

7. Submission and Miscellaneous Information

The complete Student Assistantship Application Package must be submitted before consideration of the applicant will be made.

Notification of approved assistantships will be given by the director of the Center directly to the applicant.

Assistantships may be renewable, but only upon request. For an assistantship to be renewed, the request should be made in person to the director of the Center at least 30 days prior to the end of the current assistantship period.

Assistantships are considered invalid and forfeited if the recipient does not study at NOBTS or ceases to study at NOBTS.

Assistantships are not transferable to other settings or institutions.

Changes in an assistantship recipient's outside obligations may justify a reconsideration of the continuation of the assistantship even before the end of the full term of the assistantship.

Failure to fulfill the work expectations associated with the assistantship will result in the forfeiture of the assistantship.

Assistantship requests should be sent to the following address:

HCNTTS Student Assistantship Application
 c/o Dr. Bill Warren
 3939 Gentilly Blvd.
 New Orleans, LA 70126
 (504) 816-8190

For more information or to have questions answered, e-mail the director at wfwarrenii@me.com