

STUDENT APPLICATION FOR ADMISSION

Fall semester 2022_____ Spring semester 2023_____

| Name | | Birth date | |
|-------------------------|-------------------------|----------------|---|
| Address | | | |
| Street | (City) | (State) | |
| Home Phone () | | Cell () | |
| Email Address | | | |
| Best Time To Contact (|)day (|) evening | |
| High School | GED | Date Graduated | |
| Address | | | = |
| City/State/Zip | | | _ |
| | | | |
| Colleges/Universities o | r other Schools Attende | <u>ed</u> | |
| Location | Date | Credits Earned | |

| Location | Date | Credits Earned |
|--|-------------------|--|
| Previous Certifications | | |
| Date | | |
| | | |
| Che | ck the degree pro | gram you wish to qualify for: |
| Associates Bachelors | Masters | Doctorate |
| | | |
| Please include a transcript of experience and your plans | | nded. Include an attached sheet of ministry use this education degree. |
| improvement and will be u | sed to enhance my | ogram for my own personal and private academic y gospel ministry. I submit that all information to the best of my knowledge. |
| Applicants Signat | ure | Date |
| | | |
| | | cial use only: |
| Approved | Conditional | Approved |
| Not Approved | | |
| Signature | | Date |
| Comments | | |