New Hope And Life School of Religion Theology & Seminary
NHL Christian Leadership Institute

Date: _____

APPLICATION FOR ADMISSION

Degree Program:_____

TYPE OR PRINT:

_____
Last Name   First Name   Middle Name   Maiden or other name

_____
Street Address   City   State   Zip Code

_____ US Citizen   Yes__   No__
Country

_____
Home Phone (include area code)   Work#   Cell#

_____
E-mail address

Personal Information

Fill in all appropriate information:

SSN:_____   DOB:____/____/_____   Gender: Male   Female

Marital Status: Single   Married   Separated   Divorced   Widowed

Race: African-American Asian   Caucasian   Hispanic   Other:_____

SPIRITUAL INFORMATION

When did you accept Jesus Christ as your Savior?
_____

Do you attend church regularly? _____   Are you a member? _____

_____
Church Name   Address   City   State   Zip code
_____
Pastor's Name   Church Telephone Number

May we speak with your Pastor directly? _____

Are you in full-time ministry?   Yes   No

If so, in what capacity? _____

Are you serving in ministry in your home church?   Yes   No
If so, in what capacity? _____

CREDENTIALS

Number of years in Ministry: _____   Denomination: _____

Credentials: Licensed   Ordained

FAMILY INFORMATION

Spouse: _____

Is your spouse serving in ministry? _____   In what capacity?_____

Children: Please list all children living with you.

_____
Name   Birth Date   Son/Daughter

_____
Name   Birth Date   Son/Daughter

Person to contact in case of emergency:

_____
Name: Relation: Phone#

EDUCATION

Are you a high school graduate: Yes   No   GED

Highest educational level attained above High School:

1   2   3   4   BachelorsMasters   Doctorate

Beginning with high school, list all educational institutions attended:

Name of School   Dates   Major   Diploma or Degree
_____

_____

_____

_____

FINANCIAL INFORMATION

How will you pay for tuition?   Personal Funds   Sponsor

I hereby certify that I have read and answered all question honestly and accurately.   I certify that the above information is true to the best of my knowledge. I understand that to deliberately falsify any information will result in my immediate expulsion from the New Hope and Life School of Religion (NHL Institute) and Seminary.

_____
Applicant's Signature   **Date**