

(For Office Use Only)		
Date rec'd Fee		
Ref. rec'd 123		
Student ID#		

APPLICATION FOR ADMISSION

(Please type or print clearly)		
FULL NAME:		
ADDRESS (street and box no.):		
CITY:	STATE: ZIP:	
	WORK PHONE:	
How did you hear about the Colle	ge? (Please give a specific name):	
For which semester are you apply	ng? (Please specify dates- See enclosed catalogue schedule):	
	FALL SEMESTER (Date):	
	SPRING SEMESTER (Date):	
Have you previously attended Cal	vary Chapel School of Ministry? If so, what year?	
V 1	lmission to Calvary Chapel School of Ministry? If so	-
	nool full time (at least 12 credits per semester)?	
Is it your intention to complete th	e full four-semester program?	
Personal Information:		
Age: Sex:	Occupation/Trade:	
Social Security Number:	Date of Birth:	
Place of Rirth	Citizenshin:	

Note: If English is not your native language or if you have learning disabilities, special help is available at CCSM. Do you feel you may need this help?						
Students not proficient in English must take the Test of English as a Foreign Language (TOEFEL).						
Marital Status (Circle One): S M D W Name of Spouse:						
Children? Please list names and ages:						
Name of one parent or nearest living relative (or person to contact in case of emergency):						
Name:Phone:						
Address:						
Medical Information (Use a separate sheet of paper if necessary.)						
Are you in good health? When was your last complete physical examination?						
Do you have any physical handicaps?						
List any major illnesses you have had:						
Do you have any communicable diseases? (Explain)						
Have you been or are you presently under psychiatric for psychological care, or been in counseling or psychotherapy? (Explain)						
Have you ever been hospitalized or admitted to a treatment facility for any reason? If so, where? (Explain)						
General Information (Use a separate sheet of paper if necessary.)						
Are you a current smoker? (If yes, explain)						
Do you currently drink alcoholic beverages? (If yes, explain)						
Have you ever or do you currently use any illegal drugs? (If yes, explain)						
Have you ever been involved in any legal problems? (If yes, explain)						
Do you have a personal history of violence or abuse towards others, or of sexual immorality? (If yes, explain)						
Does your life currently conform to Biblical standards of morality? (If not, explain)						

Is there any habitual sir	n in your life that af	fects your walk with Goo	l? (If yes, explain)		
Are you currently involve	ved in any problema	atic interpersonal relatio	onships? (If yes, ex	plain)	
Have you ever been inve	rolved in any non-Ch	nristian cult or occult ac	tivities? (If yes, exp	blain)	
Education					
What is your education present. Give names of		n high school to present? .ttended.)	? (Please list all sc	hools attended from h	nigh school to
NAME OF INSTITUTION	YEARS ATTENDED	DEGREE/ DIPLOMA?	MAJOR/ MINOR	YEAR RECEIVED	
(Note: Please have your send a copy of your dipl	_	ege send us a copy of yo cate.)	ur latest school tra	anscript. If high schoo	ol only, please
_		t CCSM (two or three homstances:		*	lass), describe
References					
will not be considered.	Please give the form Ve would like one fr	nclosed). If the required ns to those people who h om your pastor or anoth abers.	nave known you fo	r at least one year and	d well enough to
Personal Profile	Sketch	(Please use a separate sl	neet of paper.)		
1. Please describe:	a) Your pers	sonality,	b) Your rela	ationship with others.	
2. Please list and descr	ribe: a) Your per	sonal strengths and wea	knesses	b) Your spiritual gifts	
3. Please list your talen	nts, hobbies and inte	erests.			

Spirit	tual Life Profile Sketch	(Please use a separate sheet of paper.)			
1.	Please describe in detail your testimony of how you became a Christian or your born-again experience.				
2.	Please describe your current church involvement.				
3.	Where do you attend church?				
4.	How often do you go to church?				
5.	How long have you been a part of this fellowship?				
6.	Please state the reasons why you des enhancing your present spiritual life	sire to attend Calvary Chapel's School of Ministry, and how you see it and future ministry plans.			
7.	How do you feel about serving God in	n our Servanthood Program?			
Please l	ist the three Christian preachers/teac	thers that have most influenced your life:			
	1.	-			
	2.	-			
	3				
Please l and aut		nan the Bible) that have most influenced your life. (Please identify both title			
	1				
	2				
	3				
State	ement of Faith				
On a se _l	parate sheet of paper, write a brief but	t concise statement of your belief regarding the following:			
	1. The Bible	6. Salvation			
	2. God	7. Baptism with the Holy Spirit			
	3. Jesus Christ	8. Eschatology (End Times Events)			
	4. The Holy Spirit	9. The Rapture			

10. Eternal Security

5. Sin

Work-Study Program

In order to keep tuition costs to the lowest rate possible and to teach the student the principles of practical servanthood and ministry, each student is required to participate in the work-study program on the School of Ministry grounds for eight hours per week. (Hours are somewhat reduced for married students who bring their families.) In addition, students are periodically asked to serve in special capacities to minister to others.

Financial Responsibility

Full payment of tuition is due and payable during registration hours on the first day of school. Please see the current College catalog for the refund policy of the school.

Application	Checklist
I ha	ave completely filled out the application in the manner requested.
I ha	ave given my reference forms to the necessary people.
I ha	ave enclosed my \$25 application fee (this is non-refundable).
I ha	ave enclosed a small photograph of myself for your records.
	ave enclosed a copy of my high school diploma or GED certificate, and my high school college transcripts.
I ha	ave signed and dated this application
	ndence to the address at the top of this application. We will contact you after receiving and reviewing and all three reference letterforms.)
attendance and the standards of the C	plication to Calvary Chapel School of Ministry. I understand my responsibility for punctual, regular class are fulfillment of all classroom assignments. I will cooperate in observing all regulations and upholding the College. In addition, I also understand that my tuition is due and payable during the registration hours on tool, and that I am required to work a minimum of eight hours per week in the work-study program.
Signed:	Date:

Calvary Chapel School of Ministry does not discriminate on the basis of race, sex, ethnic background, native language, nationality or physical disability. CCSM is a ministry of Calvary Chapel of the Finger Lakes, and gives priority to members of Calvary Chapel for admission.