



School of Ministry Application 2018-2019

Your Basic Info

Full Legal Name: _____
Last First Middle

What name do you prefer to be called? _____

Gender: Male Female

Attach a recent
picture of yourself

Marital Status: Single Married Divorced

Date of Birth (mm/dd/yy): _____

Cell Phone: _____

Email: _____

Permanent Address

Street: _____

City: _____ State: _____ Zip: _____

Current Address

Street: _____

City: _____ State: _____ Zip: _____

T-shirt size: S M L XL XXL

How did you hear about School of Ministry?

Emergency Contact

In case of an emergency or accident, whom should we notify?

Name: _____

Cell Phone: _____

Email: _____

Relationship to you: _____

Church

Church you currently attend: _____

Pastor's Name: _____

Church Website: _____

Church Email: _____

Church Phone: _____

How long have you attended? _____

Education

List any collegiate and post-collegiate education

School Name: _____ Major: _____

Years attended (e.g. 2017-2018): _____ Degree (if any): _____

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Years attended (e.g. 2017-2018): _____ Degree (if any): _____

Employment

Present Employer: _____ Occupation: _____

Military Service (please specify): _____

Have you served in any capacity at New Heights Church? Yes No

If yes, please specify which area(s): _____

References

Please list three personal or professional references (e.g. a pastor, mentor, boss, relative)

Name: _____ Phone: _____

Email: _____ Relationship: _____

Name: _____ Phone: _____

Email: _____ Relationship: _____

Name: _____ Phone: _____

Email: _____ Relationship: _____

Personal Questions

Explain how and when you became a Christian.

Please describe your present relationship with the Lord. What is your current practice in regards to Bible study and prayer? What do your devotional times look like?

Describe your relationship with your local church and pastor, including areas of service and leadership experience.

Please describe your long-term goals. Do you have any idea about your life's calling specifically?

What are your reasons for wanting to be part of School of Ministry? (Please share your expectations, and include at least two specific goals you wish to accomplish from this upcoming experience).

Are there any special circumstances we should know about (i.e. family, background, or medical)?

What do you see as your strengths (things you do well)?

What do you see as your weaknesses?

In what areas of your life do you want to grow and/or change?

What is your spiritual gift? If you are not sure, what do you think it could be?

Have you ever had any physical, mental, or emotional disabilities? If yes, please describe in detail.

Do you play a musical instrument? Yes No

If yes, what and how long have you played? _____

What things do you like to do in your spare time? (Your hobbies and interests)

Tell us about any leadership positions you have held in any church, social, fraternal, or civic organizations.

If single, are you engaged to be married? Yes No

If yes, when will you be married? _____