



WORSHIP CENTER
SCHOOL OF MINISTRY

If less than one year, what church were you involved in previously? _____

Please list any other churches you have been involved with within the past 10 years

LIFESTYLE

Age/year when you accepted Jesus Christ as your personal Lord and Savior _____

Age/Year when you were Water Baptized _____

Please list any ministry experiences/positions you have held, both inside and outside the church

Is there anything in your life that might come up as a questionable issue? Yes No
(If yes, please explain.)

Do you or have you ever used illegal drugs? Yes No (If yes, explain)

Have you ever been convicted of a felony? Yes No
(If yes, please explain in detail)

FINANCIAL

How will you pay for your tuition? _____

Do you see any reason why you would not have the required tuition fees by the required dates? Yes No

If yes, please explain why and how you plan to make your tuition payment.

List the current amount of current debts, loans, or payments owed

Will these be paid off by the time you enter

? Yes No

If not, how do you plan to make these payments? _____

Do you currently own a vehicle? Yes No

Do you currently have automobile insurance for your vehicle? Yes No

EMPLOYMENT

Are you currently employed? Full-time Part-time Hours per week _____

Place of employment _____

Position _____ Work phone (____) _____

How long have you worked there? _____

Describe your job responsibilities and your relationship with your supervisor and co-workers

Secondary place of employment (if applicable) _____

Position _____ Work phone (____) _____

How long have you worked there? _____

Describe your job responsibilities and your relationship with your supervisor and co-workers

Please list your past employment, include military service and periods of unemployment

Position	Start Date	End Date
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_____	_____	_____
_____	_____	_____

EDUCATION

Check that which applies regarding your educational status:

- High school (If so, what year) _____
- College (If so, what year) _____

Check that which applies regarding your educational background:

- High School graduate
- College graduate
- Some college (If so, what year completed) _____

Please list in chronological order, all high schools, colleges, or professional schools that you are attending or have attended.

Institution	City, State, Zip	Dates of Attendance (mo/yr)

Date of College Graduation (mo/yr) ____/____ GPA _____

Date of College Graduation (mo/yr) ____/____ GPA _____

ACT Score _____ SAT Score _____

FAMILY INFORMATION

Marital Status: Married Single Divorced Widow(er)

Number of children (if any): _____

If you are single, complete this portion:

Father/Guardian's name _____
Last First Middle

Address _____
Number and Street City State ZIP

Home Phone (____) _____ Work Phone (____) _____
Email Address _____

Mother/Guardian's name _____
Last First Middle

Address _____
Number and Street City State ZIP

Home Phone (____) _____ Work Phone (____) _____

Email Address _____

MINISTRY TRACK

Ministry Tracks are an integral part of the Worship Center School of Ministry. While there will be an interview process once you are on campus we would like to know which tracks you are interested in now. Please choose two ministry tracks you are interested in, placing a number one by your first choice and a number two by your second choice.

- ___ Worship Ministry ___ Youth Ministry ___ Children's Ministry
- ___ Missions/Outreach ___ Pastoral Ministry ___ Media Ministry

Describe why you are interested in your first and second areas of ministry and what skills you possess in these areas:

REFERENCES

Please give three references (may not be a family member) of people who are well acquainted with you. These must be different from your Pastoral Recommendation.

Name _____ Relation _____ Phone (____) _____

Name _____ Relation _____ Phone (____) _____

Name _____ Relation _____ Phone (____) _____

Applicant's Name: _____

PASTORAL REFERENCE

PASTORAL INFORMATION

Name _____

Church _____ Position _____

Address _____
Number and Street City State ZIP

Phone (____) _____ Email Address _____

SECTION 2: PLEASE ANSWER THE FOLLOWING QUESTIONS

How well do you know the applicant? Very Well Well Casually

Does the applicant know Christ as personal Savior and Lord? Yes No

Does the applicant demonstrate Christ in his/her lifestyle? Yes No

Please describe: In your association with the applicant what has been the level of commitment you have seen exemplified? Faithful Inconsistent Other

Describe the applicant's leadership ability:

Prefers to follow Makes some effort to lead Good ability Exceptional ability

What are the applicant's strong points (include special abilities)?

PASTORAL APPROVAL

Do you fully approve of the applicant enrolling at Worship Center School of Ministry?

Yes No

Comments (Please describe any reservations or concerns):

Signature _____ Date _____

Thank you for completing this recommendation form. Please keep this form confidential and mail it directly to Worship Center School of Ministry. P.O Box 69. Alamogordo, NM 88311

BACKGROUND CHECK RELEASE

In connection with my application, I authorize Worship Center School of Ministry, or their agent, to solicit background information relative to my criminal record history. I understand that Life Leadership College may conduct inquiries into my background that may include criminal records, Personal references and other public record reports pertaining to me.

I authorize without reservation any persons, agency, or other entity contacted by Worship Center School of Ministry, or their agent, for purposes of obtaining background report information, to furnish the above mentioned information.

I release Worship Center School of Ministry, their respective employees, or their agent and employees, and all persons, agencies and entities providing information or reports about me from any and all liability arising out of furnishing any such information or reports.

Social Security Number _____ - _____ - _____

Signature _____ Date _____