



# Impact! School of Ministry Application of Admissions

## Requirements for admission:

1. Complete application in its entirety. If an area does not apply, write NA.
2. Enclose \$10.00 non-refundable application fee. (check or money order)
3. Applicants must be at least 16 years of age. High School students must have written consent from their parents or legal guardians.
4. Please print or type legibly in black or blue ink
5. Mail this application to Impact! School of Ministry mailing address.

## General Information

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Hm. Phone \_\_\_\_\_ Wk. Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Male \_\_\_\_ Female \_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Married? \_\_\_\_

## Spiritual Information

When did you accept Christ as your personal Savior? \_\_\_\_\_

Have you received the Baptism of the Holy Spirit? (Acts 2:4) \_\_\_\_\_

Home Church \_\_\_\_\_

Address \_\_\_\_\_

Pastor \_\_\_\_\_ Phone \_\_\_\_\_

Do you tithe to your church regularly? \_\_\_\_\_

What area of ministry do you believe God is calling you to? \_\_\_\_\_

## Emergency Notification Contact:

Name \_\_\_\_\_ Phone \_\_\_\_\_

***I hereby state all the information contained on this application is correct and true. Any false information can be grounds for my immediate dismissal.***

Signature \_\_\_\_\_ Date \_\_\_\_\_