

APPLICATION FOR ADMISSION TO DEGREE OR CERTIFICATE PROGRAM

PERSONAL INFORMATION:

Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (City) (State) (ZIP)

Phone Numbers: _____
(Home) (Mobile) (Work)

e-mail Address: _____

Social Security Number: _____ (or other personal identification number with explanation)

Male Female

Date of Birth: _____
(Day) (Month) (Year)

Home Church: _____

Country of Citizenship: _____

If married, spouse's name: _____

If you have children, children's names and ages: _____

DEGREE OR CERTIFICATE PROGRAM:

- | | |
|---|--|
| <input type="checkbox"/> Certificate of Ministry (C.Min.) | <input type="checkbox"/> Master of Ministry (M.Min.) |
| <input type="checkbox"/> Certificate of Theology (C.Th.) | <input type="checkbox"/> Master of Theology (M.Th.) |
| <input type="checkbox"/> Bachelor of Ministry (B.Min.) | <input type="checkbox"/> Doctor of Ministry in Global Church-Based Theological Education (D.Min.) |
| <input type="checkbox"/> Bachelor of Theology (B.Th.) | <input type="checkbox"/> Doctor of Ministry in Theology in Culture (D.Min.) |
| | <input type="checkbox"/> Credit for Individual Course(s) _____ <small>Specify Name of Course(s)</small> |

Name of Partner (church, church network, church-planting movement/team, school, or mission agency) through which the program is being offered:

Name of Certified Leader of Partner listed above who is recommending you for this program:

Name of Local Mentor(s) who will provide your personal development assessment:

BACKGROUND (PLEASE COMPLETE ON A SEPARATE SHEET):

1. List and describe past and current ministry positions, roles, and responsibilities.
2. Give name and location for church of which you are currently a member. Or give the contact information for a leader of the ministry team with which you serve. If you are in a transition between churches or ministry teams, please explain.
3. Describe why you desire to earn this degree or certificate, including how your ministry will be enhanced by it.
4. List secondary and post-secondary education experiences that demonstrate prerequisite academic ability for this program.
 - For formal schooling, give name, location, dates enrolled, diploma/degree earned, and major area of study (if applicable).
 - For education experience other than formal schooling, provide a brief explanation of the details, including any standardized assessments used and contact information that can be used for verification purposes.

SUBMITTING YOUR APPLICATION:

Please mail form to:
Antioch School of Church Planting and Leadership Development
2400 Oakwood Road, Ames, IA 50014

or e-mail to:
info@antiochschool.net

Visit our website:
antiochschool.edu

STEPS IN THE ADMISSION PROCESS:

1. Obtain the commendation of a certified leader of the partner program in which you desire to study.
2. Complete this application form.
3. Send the application form, initial payment (refundable if you are not admitted), and evidence of prerequisite academic ability for this program (see Handbook for more details).
 - a. Transcripts/diplomas from formal education experiences.
 - b. Results from standardized examinations (GED, ACT, SAT, MRE, etc.)
 - c. Other evidence from informal and nonformal education (see Handbook for more details).
4. When admitted, you will receive an admission packet that includes the following:
 - a. Admission letter stating date on which enrollment begins, responsibilities of students and the Antioch School, and a current Handbook (which stipulates policies and procedures for your program).
 - b. Life and Ministry Development Portfolio binder.
 - c. Instructions for e-portfolio system.
 - d. Instructions for making payments.
 - e. Life and Ministry Development start-up kit (instructions for beginning MAP, Personal Development Plan, and Personal Development Assessments).

Print Name: _____

Signature: _____

Date: _____