



THE KING'S SEMINARY

Jack W. Hayford, Founder

OFFICE OF ADMISSIONS
14800 Sherman Way, Van Nuys CA 91405-2233
Phone: 818-779-8040 • Fax: 818-779-8429

REAPPLICATION FOR ADMISSION

INSTRUCTIONS

1. Please type or print all requested information.
2. Submit Reapplication with a non-refundable \$45.00 application fee.
3. Have **official** transcripts from any schools attended since your last enrollment with The King's sent directly to The King's Seminary, Office of Admissions.

I request admission for: Master of Divinity Master of Practical Theology
 Certificate in Christian Ministry Certificate in Biblical Studies

Fall Quarter Winter Quarter Spring Quarter Summer Year _____
 Full Time Part Time

BIOGRAPHICAL INFORMATION

Name _____
FIRST MIDDLE LAST MAIDEN

Preferred First Name _____

Permanent Address _____

Mailing Address if different from above: _____

Phone: Home (_____) _____ Work (_____) _____ Cell (_____) _____

Fax Number (_____) _____ E-Mail _____

Social Security Number _____ - _____ - _____ Gender Male Female

Date of Birth _____/_____/_____ Place of Birth _____
MO. DAY YEAR CITY STATE NATION

Marital Status

Never Married Married Separated Divorced Re-Married Widowed

Number of Children _____ Ages _____ Spouse's Name _____

Citizenship

U.S. Citizen Permanent Resident Alien Non-Immigrant Visa Type _____

PROFESSIONAL INFORMATION

Please use separate sheets of paper to complete answers as necessary.

1. When were you last enrolled at The King's?
2. Why did you interrupt your enrollment?
3. Have you attended any other schools since you ceased enrollment at The King's? ___ Yes ___ No
Please list the schools attended and the dates attended.
4. If the answer to the prior question is "yes," what courses did you take and what grades were received for each course?
Official transcripts for this work must be submitted to The King's.
5. Please state and **discuss in detail** the activities you have been involved in since your break in continuous enrollment at The King's. Be sure to include items such as employment, church activities, etc.
6. Has there been any change in your marital status or citizenship status since you were last enrolled? Explain in detail.

7. Why are you seeking re-enrollment at The King's?

8. What are your educational and ministry goals if you are accepted for readmission?

9. Discuss your commitment to maintain continuous enrollment if readmitted.

SPIRITUAL DATA

What church do you currently attend? _____

Mailing Address _____

Pastor's Name _____ Phone Number _____

Years of Attendance _____ Member Yes No

REFERENCES

Please list three (3) persons **other than family members** who have known you for at least one year and whom The King's Seminary may contact for supplementary information. Please inform references of this possibility. If a faculty reference is unavailable, choose a colleague with at least a master's degree.

References/Names	Address	Relationship	Years Known	Phone Numbers
Pastor:				Home: Work:
Faculty:				Home: Work:
Colleague:				Home: Work:

FINANCIAL INFORMATION

How do you plan to pay for your education?

- Personal Funds Federal Title IV Funding Active Duty Military Assistance VA Benefits

Vocational Rehabilitation: Type _____

Scholarship: Define the scholarship you have _____

Other _____

I hereby apply for readmission to **The King's Seminary** and certify that to the best of my knowledge the information given in this form is correct. If readmitted, I will uphold and abide by all the regulations and standards of **The King's Seminary**. I understand that confidential forms may be requested of persons named on this application. Such forms will be returned directly to the Admissions Office with the understanding that their contents are not available to me. I hereby waive my right to their content.

I understand that the information contained in my reapplication and student file is available to the faculty and administration of **The King's Seminary** for evaluation and advisement purposes.

Signature

Date

Please submit this completed reapplication and \$45.00 application fee to:

THE KING'S SEMINARY
OFFICE OF ADMISSIONS
14800 Sherman Way, Van Nuys CA 91405-2233
Phone: 818-779-8040
Fax: 818-779-8429
Admissions@kingsseminary.edu

APPLICATION CHECKLIST

- Completed Reapplication
- Official transcripts requested from all schools attended since previous enrollment at The King's
- \$45.00 Application Fee

The King's Seminary admits students without regard to race, color, sex, national or ethnic origin, age, marital or veteran status.

OFFICE USE ONLY

Date Received _____ Application Fee Received _____