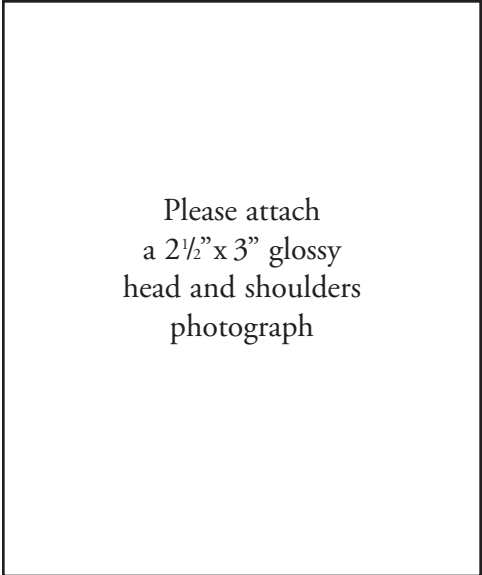




THE KING'S SEMINARY

Jack W. Hayford, Founder

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



Please attach
a 2½" x 3" glossy
head and shoulders
photograph

APPLICATION FOR ADMISSION

STEPS IN THE ADMISSIONS PROCESS

1. Complete this application. Please type or print all requested information. All portions of this application must be completed in order to be considered for admission.
2. Have official transcripts from all post secondary schools attended sent directly to The King's Seminary, Office of Admissions.
3. Submit a non-refundable \$45 application fee.
4. Submit the completed application and application fee directly to the Office of Admissions. You may fax the application but you **must** follow-up by mailing the original copy.

PERSONAL DATA

Name _____
FIRST MIDDLE LAST MAIDEN

Preferred First Name _____ Social Security Number _____-_____-_____

Street Address _____ Apt.# _____

City _____ State _____ Zip _____

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

Fax Number (_____) _____ E-Mail _____

Date of Birth (MM/DD/YY) _____ Age _____

Place of Birth _____
CITY STATE NATION

Gender Male Female

Citizenship U.S. Other

Are you a legal permanent resident of the U.S.? Yes No

If not, what is your immigration status? _____

Please attach a notarized copy of your visa.

Ethnicity African-American Asian American Caucasian
 Hispanic Native American Other _____

List languages other than English that you speak fluently: _____

Marital Status Never Married Separated Re-Married
 Married Divorced Widowed
Spouse's Name _____ Spouse's Occupation _____
Number of Children _____ Names & Ages _____

EDUCATIONAL AND PROFESSIONAL INFORMATION

- List in chronological order ALL schools attended since high school.
- Please have *official transcripts* from EACH school sent directly to The King's Seminary, Office of Admissions.

Name of College/University	Location	Dates		Field of Study	Degree Earned or Hours Completed
		From	To		

Have you earned a Bachelor's degree from an accredited institution? Yes No

What was your cumulative Grade Point Average? _____

Have you ever been dismissed from or denied admission at any school? Yes No

Have you ever been convicted of a felony? Yes No

If yes, please include explanation on a separate sheet.

Have you ever undergone psychological counseling? Yes No

If yes, please include explanation on a separate sheet.

- Beginning with the most recent, please list in chronological order your employment history with inclusive dates.

Employer	City	State	Position	Dates	
				From	To

Are you currently employed? Yes No How many hours do you work weekly? _____

Name of Company _____ Current Position _____

Name of Supervisor _____ Telephone Number of Supervisor (____) _____

PROGRAM SELECTION

When do you intend to enroll? Fall Winter Spring Summer Year _____

Do you plan to attend Full-time Part-time

For which program are you applying? Master of Divinity Graduate Certificate in Christian Ministry
 Master of Practical Theology Graduate Certificate in Biblical Studies

Declared area of Concentration: Practical Ministry
(Choose one) Ministry of Healing
 Pastoral Care and Counseling
 Transformational Urban Ministry
 Worship
 Messianic Jewish Studies

SPIRITUAL BACKGROUND

Full Official Title of Denomination/Fellowship _____

Name of Local Church _____

Mailing Address _____ City _____ State _____ Zip Code _____

Pastor's Name _____

Pastor's Phone Number _____ Fax Number _____

Pastor's Mailing Address _____ City _____ State _____ Zip Code _____

Are you a member? Yes No Years of attendance _____

Are you currently in ministry? Yes No Position _____

Are you a licensed minister? Yes No

Are you ordained? Yes No Date of ordination _____

Organization with which you are licensed and/or ordained? _____

REFERENCES

List the name/contact information of three (3) persons other than family members who have known you for at least one year and whom the seminary personnel may contact. Please inform references of this possibility. If a faculty reference is unavailable, choose a colleague with at least a master's degree.

Pastor

Name _____ Position _____

Mailing Address _____ City _____ State _____ Zip Code _____

Phone: _____ Fax _____

Years known: _____

Faculty

Name _____ Position _____

Mailing Address _____ City _____ State _____ Zip Code _____

Phone: _____ Fax _____

Years known: _____

Colleague

Name _____ Position _____

Mailing Address _____ City _____ State _____ Zip Code _____

Phone: _____ Fax _____

Years known: _____

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 _____
-

AUTOBIOGRAPHY — Writing Samples

To enable the Admissions Committee to better know you, please answer the following questions thoroughly and reflectively. Each question should receive a two-to-three page answer. Responses should be typed. **These typed pages are to be attached to the application.** Please understand that these responses will constitute a writing sample for the Admissions Committee and provide a sample of your ability to communicate clearly.

- A. Reflecting upon your spiritual pilgrimage, describe your spiritual journey chronologically, including the discussion of your personal relationship to Jesus Christ and the most significant events and influences upon your life. What major events and traumas (i.e., family death, divorce, career change, etc.) have occurred in your life and what has been their impact upon you?
- B. Present a statement of your call to ministry and how you feel the program of The King's Seminary will equip you for this ministry. What do you perceive to be your strengths and weaknesses for ministry?

The King's Seminary may require a personal interview, psychological testing, or other information in order to process your application for admissions.

I hereby apply for admission to **The King's Seminary** and certify that to the best of my knowledge the information given in this form is correct. If admitted, 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 in this application. Such forms will be sent 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 application and student file is available to the faculty and administration of The King's Seminary for evaluation and advisement purposes.

Signature _____

Date _____

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

APPLICATION CHECKLIST

- Completed application with attached essays Attached photograph
- Official transcripts requested from all schools attended since high school \$45.00 Application Fee

OFFICE USE ONLY

Date Received _____ Application Fee Received _____