

School Use Only

File Numbe	er:
File Code:	
Appl. Fee:	

Undergraduate Application

General Instruction: Please print or type all information requested. You may opt to refrain from answering any question by inserting N/A as a response.

STATUS New Applicant	Reactivating / F Reactivating / Former					
PERSONAL INFORMATION	-	, etadomo: il yoo,	Cladon			
Last / Family Name:		н	lome Ad	dress:		
First / Given Name:						
Middle News.						
Primary Phone:		(Country Postal Code / Zip			
		F				
Social Security No:		I	E-Mail: _			
Title:MrMs	MrsRev	Pastor	Date of	Birth: (ex: July / 13 / 85)	/	/
Marital Status:SingleMarriedWidDiv Religious Affiliation:						
Gender:Male	Female Ethnicity:		Ful	Gospel Assemblies	_Other Pente	costal
Country of Citizenship:			ProtestantCatholic			
Primary Language:			Oth	ier:		
ACADEMIC INFORMATION Highest Level of Education	Completed:					
(ie: High School, Junio	r College, College, Gra	aduate School)				
List all Post-Secondary Ins	titutions Attended. Ea	arliest to Latest:		cial Transcripts will be se I or institution to Phrear \$	•	
Institution Name	Dates Attended	Major / Conce	ntration	Cert /Diploma/Degree	Sending Of Transcri	
					Yes	No
					Yes	No
					Yes	No
					Yes	No
					Yes	No
					Yes	No

<u>MINISTRY AFFILIATION</u> For all applicants presently holding Ministerial Credentials recognition.

I presently hold ministerial credentials with:Full Gospel Assemblies	Other
Address:	Country
Credential Held:CommissionedLicenseOrdained	Date Obtained
Ministry Position Held: (ie: Evangelist, Pastor, Missionary, Deacon)	
I do not hold ministerial credentials, however I feel a call upon my life for min	istry:YesNo
It is my desire to study that I might prepare for entering ministry or further dev	veloping in ministry:YesNo
PROGRAMS OF STUDY Indicate the program of study for which you are main	aking application.
Diploma in Church Ministry - Clergy Certification	

- ____Associates in Biblical Studies 60 Credits
- ____Associates in World Evangelism 60 Credits
- Bachelors in Bible & Theology 120 Credits
- ____Undeclared. Select Enrollment

HOW DID YOU COME TO LEARN OF PHREAR SCHOOL OF THEOLOGY? ____

CONFIRMATION:

I agree to and understand the student standards, foundational principles, regulations and provisions set forth by Phrear School of Theology and I affirm that I will faithfully adhere to, honor and follow all student regulations and guidelines as posted within the school catalog. I further acknowledge and understand that completion of this program with Phrear School of Theology does not guarantee me the offer of nor my acceptance for any position with any church, organization, institution, or company.

I agree that it is my responsibility to verify and determine the applicability of Phrear School of Theology credits toward any educational goal or endeavor that I might have.

I understand that Phrear School of Theology programs are limited to the principles of religious instruction for personal development in the work of the Full Gospel ministry of the Lord Jesus. Certificates, diplomas and religious studies degrees are awarded for the successful completion of Phrear School of Theology programs.

I understand that I may be required to communicate by e-mail, and to communicate or receive instruction by other readily available electronic means of communication with such methods intended to meet the academic and administrative needs of the School.

I understand I am responsible for all shipping / duty fees for all materials shipped to an address outside of the USA.

_____ (check) Yes, my application fee is included with this form. (refer to fee schedule). I understand that all application fees are non-refundable seven (7) business days after this application is received by Phrear School of Theology.

Date://	Applicant's Signature:
Month DD YY	Print Full Name:
	Parent/Guardian Signature (for applicants under 18 years of age)

Phrear School of Theology - 1420 Celebration Blvd., Suite 200, Celebration, FL 34747