

Trinity Learning Community Graduate School of Ministry

Application for Admission

General Information

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Home Phone _____ Work Phone _____

Mobile Phone _____ Email _____

Personal Information

Date of Birth _____ Gender: Male Female SSN _____

Marital Status:

Single Married* Date of Marriage _____ Spouse's Name _____

Divorced Date of Divorce _____ Widowed

*Does your spouse understand the commitment necessary to complete this program and is s/he fully supportive of your decision?

Church Information

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Your area(s) of service in the church: _____

Prior Education

Please list any university, college or high school attended, degree attained, and date of graduation.

School	Grade/Degree	Date

CONTINUED ON THE NEXT PAGE --->

Are you currently a full or part-time student? Yes No

If yes, give full name and address of school currently attending and your status (e.g., how soon will you complete your current area of study). _____

If you are not a full-time student, please describe your present status or employment.

If your education was in a language other than English, please indicate your level of competence in English in the following areas:

Reading	<input type="checkbox"/> None	<input type="checkbox"/> Poor	<input type="checkbox"/> Moderate	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
Writing	<input type="checkbox"/> None	<input type="checkbox"/> Poor	<input type="checkbox"/> Moderate	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
Conversation	<input type="checkbox"/> None	<input type="checkbox"/> Poor	<input type="checkbox"/> Moderate	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
Oral Comprehension	<input type="checkbox"/> None	<input type="checkbox"/> Poor	<input type="checkbox"/> Moderate	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent

Are you proficient in any language other than English? _____

I am registering for the: Masters of Ministry Bachelors Program

My preferred time is: Day Classes Night Classes

My preferred location is: Corona South Orange County West Los Angeles

Please prepare brief (one typed page) statements of:

- 1) Your understanding of what it means to be a Christian;
- 2) How you became a Christian;
- 3) Your understanding of the Lord's call to you for ministry

Instructions

- 1) Complete the Application for Admission and return it to TLC at the address below with:
 - the three items requested above,
 - a letter of recommendation from your pastor or ministerial colleague, and
 - a \$50 application fee.
- 2) Please have your former college or university forward an authorized transcript of your Bachelors Degree to TLC at the address below:

Trinity Learning Community

935 N McKinley St

Corona, CA 92879