

7607 Sheldon Road
Tampa, Florida 33615
(813) 886-8492



ATTACH RECENT
PHOTOGRAPH
HERE!!!
(or send us one electronically
and we will attach it for you)

APPLICATION WILL
NOT BE PROCESSED
WITHOUT PHOTO.

PLEASE CHECK ONE:

New Student _____
Continuing / Returning
Student _____

Faith Theological Seminary & Christian College

APPLICATION FOR ENROLLMENT

Please print and answer all questions.

**Items / Categories in red must be answered before application is processed*

| STUDENT INFORMATION | | | | |
|--|--|-------------------|---|------------------|
| *TITLE: (Circle One): Mr. / Mrs. / Miss / Rev. / Other: | | | Date: | |
| Last | | First | | Middle |
| *NAME: | | | | |
| *Primary PHONE: (Circle One:) | | (Area Code) | Number | |
| Home / Cell / Work / Work-Cell | | () | | |
| Secondary PHONE: (Circle One:) | | (Area Code) | Number | |
| Home / Cell / Work / Work-Cell | | () | | |
| *ADDRESS: | | CITY: | STATE: | ZIP: |
| *E-mail address: | | | | |
| *DATE OF BIRTH (Month/Day/Year): | | SEX: (Circle One) | | HEIGHT |
| | | Male Female | | WEIGHT |
| | | | | |
| *PLACE OF BIRTH: | | | *SOCIAL SECURITY NUMBER: | |
| City State Country | | | only needed for college credit/CEUs | |
| | | | | |
| *U.S. CITIZEN?: (Circle One) Yes No | | | *IF "No" PLEASE ATTACH PROOF OF RESIDENCY | |
| (Optional) RACE: (Circle One) | | if other specify | MARITAL STATUS: (Circle One) Single Married | |
| White / Black / Hispanic / Asian / Other: | | Name of Spouse: | | Spouse's Phone # |
| | | | | |
| *NEAREST RELATIVE / FRIEND TO BE NOTIFIED IN CASE OF EMERGENCY: | | | | |
| Name: | | Relationship: | | Phone Number: |
| Address: | | City: | | State: Zip: |
| | | | | |
| *How did you hear about FTSCC? (Circle all that apply) | | | | |
| Web FaceBook Sign Flyer Brochure Pastor Affiliate Campus Friend Church | | | | |
| or Other: _____ | | | | |
| *REFERENCES | | | | |
| Please provide two references | | | | |
| Name #1: | | Relationship: | | Phone Number: |
| Address: | | City: | | State: Zip: |
| | | | | |
| Name #2: | | Relationship: | | Phone Number: |
| Address: | | City: | | State: Zip: |
| | | | | |

EXPERIENCE & BACKGROUND**EMPLOYMENT**

| | | | |
|----------------|------------------------|-------------------------|------|
| Employer Name: | Employer Phone Number: | Occupation / Job Title: | |
| Address: | City: | State: | Zip: |

***MINISTRY BACKGROUND**

| | | | |
|-------------------------------------|-------------------------|---|------|
| CHURCH BACKGROUND /DENOMINATION: | # Years in Ministry: | NAME of CHURCH CURRENTLY ATTENDING / SERVING: | |
| | | PASTOR'S NAME: | |
| CHURCH ADDRESS: | CITY: | STATE: | ZIP: |

***CURRENT STATUS IN MINISTRY: (indicate all that apply)**

Licensed ____ Ordained ____ Pastor ____ Teacher ____ Evangelist ____ Missionary ____ Layman ____
Denomination/Organization: _____ Other: _____

***AREAS OF INVOLVEMENT IN MINISTRY: (enter N/A in 'Other' space if you have none)**

Pastorate__ Teaching__ Evangelism__ Radio/TV__ Music(specify) : _____ Other(specify) : _____

***EDUCATION**

*** List all educational institutions attended, beginning with High School / Secondary School**

| NAME OF SCHOOL | DATES | MAJOR | DIPLOMA or DEGREE |
|----------------|-------|-------|-------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

ARE YOU A HIGH SCHOOL GRADUATE? _____ GED? _____ OTHER: _____

**** ALL TRANSCRIPTS SUBMITTED MUST BE LISTED ABOVE TO BE CONSIDERED FOR CREDIT ****

***STATEMENT OF PURPOSE:**

(Briefly explain the program or degree that you are seeking to complete and why.)

| |
|--|
| |
| |
| |
| |

***SALVATION EXPERIENCE:**

(A brief testimony about your relationship with Jesus Christ and how it began.)

| |
|--|
| |
| |
| |
| |
| |
| |
| |

Date of Application: _____

Applicant's Signature: _____