



APPLICATION FOR ADMISSION

Please make sure to fill out this application completely and legibly using only blue or black ink or you can type answers if you prefer.

ALL applications must be submitted with a **\$50 application fee** that will be applied to students' tuition once accepted. *Payments can be made by cash/ money order/ or check (please make checks payable to Ignite School of Ministry or ISOM),* and you can opt to go online to our website (theisom.org) and pay via credit or debit card.

Include a copy of your driver's license/ Identification card and social security card for background check purposes (these documents will be kept in individual personal files), **these documents will remain Confidential.** Make sure to turn in all letters of recommendation as well and check to see that you have completed all application requirements before submitting.

The Administration and local church body, at Tifton First Assembly of God, are praying for you and are so excited you are interested in attending **IGNITE School of Ministry.**

Note: * *Indicates you need to include a one-page response with your application for this selected item. (Document needs to be single spaced.)*

Checklist: (For Office use only)

- **Application Fee** _____ (*How did you pay it?* _____)
- **Application Fee Waiver form (if applicable)** _____
- **Copy of Picture ID** _____
- **Copy of Social Security Card** _____
- **All completed one-page responses (*)** _____
- **Letters of Reference** _____ (*Pastoral, Employer, 2-3 Friend, Spousal if applicable*)
- **Scholarship Application (if applicable)** _____
- **Background check**

INFORMATION AUTHORIZATION & RELEASE

I, _____, of _____
(Name) (City and State)

Having filed an application for admission to the _____
(School of Ministry Name)

I consent to have an investigation made as the conduct of my personal affairs, my moral character, professional reputation, fitness for my acceptance into the Ignite School of Ministry (ISOM), and such further information as may be received by or reported to the above-named School of Ministry. I agree to give any further information which may be required about my history and present admission qualification.



I authorize and request every person, firm, company, corporation, governmental agency, court, association, church, educational facility, or institution having control of any documents, records, and other information pertaining to me to

furnish to the _____ any such information, including
(School of Ministry Name)

documents, records, or other information regarding charges or complaints filed against me, informal or informal, pending or closed, and to permit the above-named School of Ministry or any of its agents or representatives to inspect and make copies of such documents, records, and other information. I specifically waive any or all rights I may have to inspect or review any information provided to this school of ministry, its agents or representatives by any person or organization.



I hereby release, discharge, and exonerate the _____,
(School of Ministry Name)

Its agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigations made

by or on behalf of the above-named School of Ministry. The _____
(School of Ministry Name)

shall not be required to verify any information received during the course of its investigations and shall not be liable for acting on the basis of any information which later appears to have been false or incomplete.



I have read and signed the foregoing Authorization and Release as my own free act and deed.

Signature

STATE OF _____

COUNTY OF _____

Subscribed and sworn before me this _____ day of _____, 19 _____

Notary Public

My commission expires: _____

APPLICANT

Mr. Mrs. Ms. First _____ M.I. _____ Last _____ (Maiden) _____

M ___ F ___ D.O.B. (MM/DD/YYYY) ___/___/___ Age ___ Social Security # ___-___-___

D.L. # or I.D. # _____ State _____ Expiration (MM/DD/YYYY) ___/___/___

CONTACT INFORMATION

Address _____

APT # _____ LOT # _____ CITY _____

State _____ Zip _____ Phone # (_____) _____ - _____ (Home/ Work/ Cell)

Email _____

EMERGENCY CONTACT

Name _____ Relationship _____

Phone # (_____) _____ - _____ (Home/Work/Cell) Email: _____

BACKGROUND INFORMATION

Home Church _____ Senior Pastor _____

How long have you attended (or been a member)? _____

*** How long have you been saved?** (Response) *** When did you feel called into Ministry?** (Response)

Have you ever led someone to the Lord? ___Y ___N Have you been baptized in water? ___Y ___N

When? _____

Have you received the Baptism of the Holy Spirit? ___Y ___N when? _____


List all areas of ministry Involvement: _____

Academics

Ministry Majors

- ✝ Pastoral Leadership
- ✝ Evangelism/ Missions
- ✝ Worship Ministry
- ✝ Youth Ministry
- ✝ Children's Ministry

**Insert
Picture
Here**



ISOM

Other Ministry Interests

(Select a minimum of 4)

College/ Young Adults Ministry

Women's Ministry

Men's Ministry

Senior Adult Ministry

Pastoral Care

Discipleship

Hospitality/ Assimilation

Administration

Sound & Media Tech

Social Media & Graphics

Big Events

Bus Ministry

PASTORAL REFERENCE

Please include 1-page typed letter of referral with this questionnaire to expound on your responses.

1. How many years have you known this applicant? _____
2. How well do you know this applicant? _____

3. Are you related to the applicant? Yes _____ No _____
4. How frequently does the applicant attend church?
Regularly _____ Occasionally _____ Seldom _____ Not Sure _____
5. In your opinion, does the applicant participate in worship?
Always _____ Often _____ Seldom _____ Never _____ Don't Know _____
6. How would you describe the applicant's spiritual maturity?
Very Mature _____ Fairly Mature _____ Not Very _____ Don't Know _____
7. Was the applicant's call to ministry evident to you? Yes _____ No _____
Please explain: _____

8. If you assigned the applicant responsibilities would you indicate his/her response by circling the appropriate number on the scale below:

	<u>Very</u>				<u>Not Very</u>	<u>COMMENTS</u>
Teachable	5	4	3	2	1	_____
Loyal	5	4	3	2	1	_____
Sincere	5	4	3	2	1	_____
Dependable	5	4	3	2	1	_____
Able to Inspire Others	5	4	3	2	1	_____
Capable	5	4	3	2	1	_____

SIGNED _____ DATE _____

PRINT NAME _____ PASTORAL TITLE _____

NAME OF CHURCH _____

ADRESS _____

P.O. BOX _____ CITY _____ ST _____ ZIP _____

PHONE (_____) _____ - _____ EMAIL _____

EMPLOYER REFERENCE

If you do not have a current employer to fill out this questionnaire, please include an additional non-family or non-related friend reference with your application.

1. How long did the applicant work for you? _____ From: _____ To: _____

2. Was the applicant dependable? _____

___ Always ___ Most of the Time ___ Usually ___ Some of the Time ___ Seldom

3. Was the applicant prompt and regular in work attendance? _____

___ Always ___ Most of the Time ___ Usually ___ Some of the Time ___ Seldom

4. What was the general opinion of fellow workers regarding the applicant? _____

___ Very Favorable ___ Favorable ___ Neutral ___ Unfavorable ___ Very Unfavorable ___ Don't Know

5. How well did the applicant relate to those in authority? _____

___ Extremely Well ___ Very Well ___ Well ___ Poorly ___ Very Poorly

6. Please circle all the words below which you believe best describe the applicant's disposition:

Quick Tempered	Cooperative	Mild Mannered	Stubborn
Congenial	Disciplined	Patient	Hardworking
Depressed	Friendly	Talkative	Quiet
Abrasive	Trustworthy	Motivated	Organized

7. Would you, without hesitation, rehire the applicant if he/she applied for work? ___ Yes ___ No

8. Any Further Comments: _____

SIGNED _____ DATE _____

PRINT NAME _____ TITLE _____

NAME OF COMPANY _____

ADDRESS _____

P.O. BOX _____ CITY _____ ST _____ ZIP _____

PHONE (_____) _____ - _____ EMAIL _____

FRIEND REFERENCE

You will need 3 Non-Family/ Non-Friend References if the Employer Reference does not apply. Please make copies of this form as needed for your application, 2 References are needed with application, however, if you have no employer reference you will need 3 References.

1. How long have you known the applicant? _____ From: _____ To: _____

2. In what social context did you meet? _____

3. In what capacity do you view your relationship with the applicant?
___ Close Friend ___ Casual Friend ___ Acquaintance

4. Have you ever been entertained in the home of the applicant? ___ Yes ___ No

5. How often have you been with the applicant socially?
___ Frequently ___ Occasionally ___ Seldom

6. Please circle all the words below which you believe accurately describe the applicant:

- | | | | | |
|------------|-------------|-----------|------------------|-------------|
| Timid | Gentle | Impatient | Modest | Impulsive |
| Nervous | Loving | Tactful | Socially Awkward | Intelligent |
| Mature | Sarcastic | Patient | Compassionate | Insecure |
| Deliberate | Congenial | Stubborn | Studious | Verbal |
| Kind | Selfish | Secure | Considerate | Relaxed |
| Abrasive | Trustworthy | Motivated | Organized | Angry |

7. How well do you judge the applicant's ability to keep confidence?
___ Very Good ___ Good ___ Average ___ Poor ___ Very Poor ___ Don't Know

8. Further comments: _____

SIGNED _____	DATE _____
PRINT NAME _____	TITLE _____
NAME OF COMPANY _____	
ADDRESS _____	
P.O. BOX _____	CITY _____ ST _____ ZIP _____
PHONE (_____) _____ - _____	EMAIL _____