

ADMISSION APPLICATION

Applications will be considered once all the required forms and fees are received. Please submit all materials as early as possible to the address below. Complete the entire application in a legible manner. Once the applicant's file is complete, including all references and statements, he/she will be notified regarding an interview with an administrator.

Following the interview, the application will be reviewed as quickly as possible. Admission to the Minister in Training Course may be granted on the basis of the application packet and interview or may require additional information.

Application Fee

A non-refundable, \$25 application fee must be submitted with your application.

Application Deadlines

No later than one month prior to the start date of the Minister in Training Course.

Application Checklist

- o Application form
- o Personal Statement: *"Why I Want to Attend the Minister in Training Course."*
- o Personal Testimony of Salvation.
- o Request references from four individuals (Pastor, Church Leader, Employer, and Academic)
- o Request official transcripts from each institution attended beyond High School
- o Application fee

Note: All personal statements should be typewritten and single-spaced.

Crossroads Christian Center will admit students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It will not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and other school-administered programs.

Send all documents to:

Crossroads Christian Center
Admissions Office
145 Fontaine Blvd.
Colorado Springs, CO 80911
(719) 328-1440

APPLICATION FOR ADMISSION

Please attach a photograph of yourself (passport style)

When do you wish to begin your enrollment (term and academic year)?

Fall semester 20____ Spring semester 20____

Indicate your anticipated academic status: o Full-time o Part-time o Credit Student o Audit

To which program are you seeking admission?

- o Module One: Leadership 101: 8 Weeks Program
- o Module Two: Leadership 102: 8 Weeks Program
- o Module Three: Training for Service Student Book (A Basic Bible Overview): 8 Weeks Program

o Module Four: Ordinance of the Church, Weddings, Funerals, and Outreach: 8 Weeks Program

PERSONAL INFORMATION

Unless otherwise required by law, this information will be kept strictly confidential.

Full legal name: _____
Last First Middle

Current address: _____

City: _____ State: _____ Zip: _____

Permanent Address (if different from above): _____

City: _____ State: _____ Zip: _____

Email: _____

Primary phone number: _____ May we text you? Yes ___ No ___

Occupation: _____

Date of Birth: _____ Place of Birth: _____ Age: _____
City/State/Country

Country of citizenship: _____ Social Security Number (last four digits): _____

If not a US citizen, on what type of visa are you presently in the US, or planning to enter the US?

_____ Expiration date: _____

Please submit a copy of your visa with your application.

The US Department of Education requests the following information on ethnic origin (for reporting purposes only). Please check one box:

<input type="radio"/> White, non-Hispanic	<input type="radio"/> Black, non-Hispanic	<input type="radio"/> Hispanic
<input type="radio"/> Asian or Pacific Islander	<input type="radio"/> American Indian or Alaskan Native	<input type="radio"/> Other

Have you ever been under Church Discipline? (Circle one) Yes No

If yes, please attach a separate personal statement (typewritten, single-spaced) entitled "Statement Regarding Church Discipline."

Have you ever used illegal drugs? Yes No Have you ever been arrested? Yes No

If yes to either of the above, you will be asked to give a more thorough explanation.

Please list special interests, hobbies, or abilities: _____

FAMILY INFORMATION

Unless otherwise required by law, this information will be kept strictly confidential.

Marital Status: Single Married Divorced Separated Widowed
 Widowed/Remarried Divorced/Remarried Engaged

If married: Spouse's Name: _____ . If you have children, names, and ages:

MINISTRY INFORMATION

Current relationship to a local church (check one):

Staff member Member Regular attendee Occasional attendee

Name of church you currently attend: _____

Address: _____ Phone: _____

Name of pastor: _____ Denominational affiliation (if any): _____

Present church membership (if different from above): _____

Address: _____ Phone: _____

Name of pastor: _____ Denominational affiliation (if any): _____

If you attend a church of which you are not a member, please explain: _____

What local church ministries have you served in? _____

Have you been baptized as a believer by immersion? Yes No

If No, please explain:

ACADEMIC INFORMATION

Please list in chronological order all academic institutions you have attended. since high school graduation in _____ (year):

High School: _____

Address: _____

Dates attended: _____

Date graduated: _____

College: _____

Address: _____

Dates attended: _____

Degree conferred: _____

(Please attach additional pages, if necessary)

Do you consider your scholastic record an accurate indicator of your academic abilities? Yes No

If no, please explain:

If you have ever been dismissed from any college or denied admission for any reason, please explain:

Have you or are you currently taking AP classes while in high school? Yes ___ No ___ If yes, which ones:

CHARACTER INFORMATION

Do you know of anyone who has a concern about your character that can be used to question your readiness to pursue Christian education? Yes ___ No ___

If yes, please explain: _____

Please evaluate yourself based on these biblical character qualities:

Faithfulness and devotion to spouse (if applicable):
5 (Outstanding) 4 (Very Good) 3 (Average) 2 (Fair) 1 (Poor)

Self-controlled, avoids extremes or excessive indulgence:
5 (Outstanding) 4 (Very Good) 3 (Average) 2 (Fair) 1 (Poor)

Well-disciplined and correctly ordered priorities:
5 (Outstanding) 4 (Very Good) 3 (Average) 2 (Fair) 1 (Poor)

Respectable and dignified character:
5 (Outstanding) 4 (Very Good) 3 (Average) 2 (Fair) 1 (Poor)

Hospitable:
5 (Outstanding) 4 (Very Good) 3 (Average) 2 (Fair) 1 (Poor)

A student of the word:

	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not given to drunkenness but sober minded:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not given to abusive speech or behavior:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not argumentative or quarrelsome:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not quick-tempered:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not greedy, materialistic, or a lover of money:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Practices spiritual disciplines:					
	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Has a good reputation in the church and community:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)

HEALTH INFORMATION

Unless otherwise required by law, this information will be kept strictly confidential.

How would you describe your overall health? Excellent Good Fair Weak

If you did not mark Excellent, please explain:

Conditions for which you are receiving medical treatment:

Condition: _____

Treatment: _____

Condition: _____

Treatment: _____

Do you have any physical disabilities or limitations which could affect your studies, responsibilities, activities, or future ministry? Yes No

If yes, please attach a separate personal statement (typewritten, single-spaced) entitled, "*Statement of Physical Disabilities or Limitations.*"

Have you ever been under clinical psychiatric care and/or related prescription medications?

Yes _ No _

If yes, please attach a separate personal statement (typewritten, single-spaced) entitled, "*Statement of Psychiatric Care.*"

FINANCIAL INFORMATION

Will you have the finances for the first semester by the time of registration? Yes No

If no, how much do you lack? _____

What is your anticipated source of income while attending the Minister in Training Course? _____

What is your present total indebtedness (excluding home mortgage, but including deferred college?

loans, credit cards, etc.) _____

Please indicate the amount of debt, if any, you expect to incur as a result of attending Mini. If none, please so state. _____

If you expect to incur debt, what are your plans for financing your Minister in training Course?

STATEMENT OF FINANCIAL RESPONSIBILITIES FOR APPLICANTS

The balance of tuition and fees is due in full by the time of registration (either by cash, check, credit card, or verified scholarship.)

APPLICANT REFERENCES

You are required to have four references (Pastor, Church Leader, Employer, Academic). Please send the reference forms included in this application packet to the four people you select as references. Be sure to include with your reference forms a pre-addressed, stamped envelope. The reference forms, once completed, should be sent directly to the Minister in Training Course Admissions Office by the person who completed them. Your references cannot be members of your family. Those you select should be people who know you well enough to provide specific examples to substantiate their recommendation. Be sure to complete the top portion of each reference form before sending it to your reference person.

Please list your four references:

Pastor Reference (If your present pastor does not know you well, you may substitute a previous pastor)

Name: _____ Position: _____

Church: _____

Address: _____

Phone: _____

Church Leader Reference (this should be a church elder, deacon, or ministry leader who is familiar with your ministry and personal life)

Name: _____ Position: _____

Church: _____

Address: _____

Phone: _____

Academic Reference (This should be a teacher in the school you most recently attended. If you have been out of school for more than five years, you may substitute another church leader for the Academic reference)

Name: _____ Position: _____

Address: _____

Phone: _____ Email: _____

Employer Reference (This should be your current or most recent employer or supervisor)

Name: _____ Position: _____

Address: _____

Phone: _____ Email: _____

EMPLOYMENT INFORMATION

Beginning with the most recent employment, please list your employment history over the past ten years.

Organization: _____

Address: _____

Position/Duties: _____

Dates Employed: _____

Reason for leaving: _____

Organization: _____

Address: _____

Position/Duties: _____

Dates Employed: _____

Reason for leaving: _____

APPLICANT AGREEMENT

I hereby certify that all statements and admissions made on this application and on all attached documentation are true and correct to the best of my knowledge. I further certify that I have personally completed this application (except for the spouse information section).

If admitted, I agree to seek earnestly the will of God for my life, to conform sincerely to the standards of conduct of Minister in Training Course, and to maintain the spirit and letter of the Crossroad's Christian Center regulations.

Signature of Applicant: _____ Date: _____

PASTOR REFERENCE FORM

THIS PORTION TO BE COMPLETED BY APPLICANT

Note: This Reference form is to be completed by someone who is not a member of your family. Please provide each reference with a stamped business envelope, pre-addressed to Crossroads Christian Center Admissions Office.

Name of Applicant: _____
Last First Middle

Address: _____

Email: _____

Notice to Applicant: Under the Family Education Rights and Privacy Act of 1974, (Buckley Amendment) which gives students the right to inspect and review their educational records, students may waive their right to see specific confidential statements and letters of recommendation. In the belief that applicants and the persons for whom they request evaluations may wish to preserve the confidentiality of those evaluations, we are giving you an opportunity to sign one of the following statements.

I waive my right to examine this form I do not waive my right to examine this form

Applicant's signature: _____ Date: _____

THIS PORTION TO BE COMPLETED BY REFERENCE

Please print your name: _____

The individual named above is applying for admission to Crossroads Christian Center Minister in Training Course. We rely on your reference to help us accurately appraise this prospective student. You can best serve this applicant by writing specific evidence of character and spiritual maturity, as well as frank evaluation of strengths and weaknesses that you have personally observed in his/her life. Please attach additional pages if necessary. Thank you for your careful attention to this important period of the applicant's life.

How long have you known the applicant?

How well do you know the applicant? Very well Rather well Casually Not well

In what capacity do you know the applicant? _____

Do you know of anyone who has a concern about the applicant's character that can be used to question his/her readiness as a minister of the Gospel? Yes No

If yes, please explain: _____

Please evaluate the applicant based on these biblical character qualities.

Faithfulness and devotion to spouse (If applicable):	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Self-controlled, avoids extremes or excessive indulgence:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Well-disciplined and correctly ordered priorities:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Respectable and dignified character:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Hospitable:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
A student of the word:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not given to drunkenness but sober minded:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not given to abusive speech or behavior:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not argumentative or quarrelsome:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not quick-tempered:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not greedy, materialistic, or a lover of money:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Has a good reputation in the church and community:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)

Please elaborate on any Average, Fair, or Weak evaluation: _____

What do you believe the student's spiritual gifts are?

Please comment on the applicant's ability to relate to others, including teamwork and capacity for leadership.

If the applicant is married or engaged, how would you evaluate the relationship?

As representatives of Jesus Christ, Minister in Training Course students are responsible to demonstrate a lifestyle consistent with His character and standards. They are to be people of high moral virtue whose sexual conduct is consistent with the standards of Scripture.

This includes abstaining from sexual immorality, including homosexual, premarital, and extramarital sexual conduct.

Do you believe the applicant is living by the standards of conduct stated above? Yes No

If no, please explain: _____

Can you conscientiously recommend the applicant for admission to Minister in Training Course? Yes No

If Yes, please check one:

Enthusiastically With confidence With the following reservations (please explain):

If there is additional information you think we should know, please include below:

You may also include names and addresses of additional references which you believe will be helpful in evaluating the applicant:

I certify that the information given in this reference form is accurate to the best of my knowledge.

Signature: _____ Date: _____

Name of Organization: _____

Title/Position: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Please mail this form directly to:
Crossroads Christian Center Admissions
Office
145 Fontaine Blvd.
Colorado Springs, CO 80911

(719) 328-1440 **CHURCH LEADER REFERENCE FORM**

THIS PORTION TO BE COMPLETED BY APPLICANT

Note: This Reference form is to be completed by someone who is not a member of your family. Please provide each reference with a stamped business envelope, pre-addressed to Crossroads Christian Center Admissions Office.

Name of Applicant: _____
Last First Middle

Address: _____

Email: _____

Notice to Applicant: Under the Family Education Rights and Privacy Act of 1974, (Buckley Amendment) which gives students the right to inspect and review their educational records, students may waive their right to see specific confidential statements and letters of recommendation. In the belief that applicants and the persons for whom they request evaluations may wish to preserve the confidentiality of those evaluations, we are giving you an opportunity to sign one of the following statements.

I waive my right to examine this form I do not waive my right to examine this form

Applicant's signature: _____ Date: _____

THIS PORTION TO BE COMPLETED BY REFERENCE

Please print your name: _____

The individual named above is applying for admission to Crossroads Christian Center Minister in Training Course. We rely on your reference to help us accurately appraise this prospective student. You can best serve this applicant by writing specific evidence of character and spiritual maturity, as well as frank evaluation of strengths and weaknesses that you have personally observed in his/her life. Please attach additional pages if necessary. Thank you for your careful attention to this important period of the applicant's life.

How long have you known the applicant?

How well do you know the applicant? Very well Rather well Casually Not well

In what capacity do you know the applicant? _____

Do you know of anyone who has a concern about the applicant's character that can be used to question his/her readiness as a minister of the Gospel? Yes No

If yes, please explain: _____

Please evaluate the applicant based on these biblical character qualities.

Faithfulness and devotion to spouse (If applicable):	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Self-controlled, avoids extremes or excessive indulgence:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Well-disciplined and correctly ordered priorities:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Respectable and dignified character:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Hospitable:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
A student of the word:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not given to drunkenness but sober minded:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not given to abusive speech or behavior:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not argumentative or quarrelsome:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not quick-tempered:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Not greedy, materialistic, or a lover of money:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)
Has a good reputation in the church and community:	5 (Outstanding)	4 (Very Good)	3 (Average)	2 (Fair)	1 (Poor)

Please elaborate on any Average, Fair, or Weak evaluation: _____

What do you believe the student's spiritual gifts are?

Please comment on the applicant's ability to relate to others, including teamwork and capacity for leadership.

If the applicant is married or engaged, how would you evaluate the relationship?

As representatives of Jesus Christ, Minister in Training Course students are responsible to demonstrate a lifestyle consistent with His character and standards. They are to be people of high moral virtue whose sexual conduct is consistent with the standards of Scripture.

This includes abstaining from sexual immorality, including homosexual, premarital, and extramarital sexual conduct.

Do you believe the applicant is living by the standards of conduct stated above? Yes No

If no, please explain: _____

Can you conscientiously recommend the applicant for admission to the Minister in Training Course?
Yes No

If Yes, please check one:

- Enthusiastically With confidence With the following reservations (please explain):

If there is additional information you think we should know, please include below:

You may also include names and addresses of additional references which you believe will be helpful in evaluating the applicant:

I certify that the information given in this reference form is accurate to the best of my knowledge.

Signature: _____ Date: _____

Name of Organization: _____

Title/Position: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Please mail this form directly to:

Crossroads Christian Center
Admissions Office
145 Fontaine Blvd.
Colorado Springs, CO 80911

(719) 328-1440 **ACADEMIC REFERENCE FORM**

THIS PORTION TO BE COMPLETED BY APPLICANT

Note: This Reference form is to be completed by someone who is not a member of your family. Please provide each reference with a stamped business envelope, pre-addressed to Crossroads Christian Center Admissions Office.

Name of Applicant: _____
Last First Middle

Address: _____

Email: _____

Notice to Applicant: Under the Family Education Rights and Privacy Act of 1974, (Buckley Amendment) which gives students the right to inspect and review their educational records, students may waive their right to see specific confidential statements and letters of recommendation. In the belief that applicants and the persons for whom they request evaluations may wish to preserve the confidentiality of those evaluations, we are giving you an opportunity to sign one of the following statements.

I waive my right to examine this form I do not waive my right to examine this form Applicant's

signature: _____ Date: _____

THIS PORTION TO BE COMPLETED BY REFERENCE

Please print your name: _____

Dear Reference:

The individual named above is applying for admission to Crossroads Christian Center Minister in Training Course. Thank you very much for taking your time to evaluate this candidate's qualifications for admission to Crossroads Christian Center. Your recommendation will become a part of his/her admissions file. We rely on your reference to help us accurately appraise this prospective student.

You can best serve this applicant by writing specific evidence of character, maturity, and academic ability, as well as frank evaluation of strengths and weaknesses that you have personally observed in his/her life. Please attach additional pages if necessary. Thank you for your careful attention to this important period of the applicant's life.

Your contact with this candidate is/was as a _____ teacher _____ counselor _____ employer _____ coach _____ other (please describe) _____

Have known candidate for _____ yrs. I know him/her _____ well _____ fairly well _____ slightly

Please check the degree to which this candidate demonstrates the following qualities:

	Excellent	Above Average	Average	Below Average	Do Not Know
Academic ability					

Academic motivation					
Written expression					
Oral expression					
Initiative					
Independence					
Originality					
Leadership					
Self-confidence					
Warmth of personality					
Sense of humor					
Concern for others					
Reaction to criticism					
Social-emotional maturity					
Adaptability					
Judgment					
Responsibility					

Can you conscientiously recommend the applicant for admission to the Minister in Training Course?

Yes No

If yes, please check one:

- Enthusiastically
 With confidence
 With the following reservations (please explain):

If there is additional information you think we should know, please include below:

You may also include names and addresses of additional references which you believe will be helpful in evaluating the applicant:

I certify that the information given in this reference form is accurate to the best of my knowledge.

Signature: _____ Date: _____

Name of Organization: _____

Title/Position: _____

Address: _____

City: _____

Phone: _____ Email Address: _____

Please mail this form directly to:

Crossroads Christian Center
Admissions Office
145 Fontaine Blvd.
Colorado Springs, CO 80911

(719) 328-1440 **EMPLOYER REFERENCE FORM**

THIS PORTION TO BE COMPLETED BY APPLICANT

Note: This Reference form is to be completed by someone who is not a member of your family. Please provide each reference with a stamped business envelope, pre-addressed to Crossroads Christian Center Admissions Office.

Name of Applicant: _____
Last First Middle Address:

Email: _____

Notice to Applicant: Under the Family Education Rights and Privacy Act of 1974, (Buckley Amendment) which gives students the right to inspect and review their educational records, students may waive their right to see specific confidential statements and letters of recommendation. In the belief that applicants and the persons for whom they request evaluations may wish to preserve the confidentiality of those evaluations, we are giving you an opportunity to sign one of the following statements.

I waive my right to examine this form I do not waive my right to examine this form Applicant's

signature: _____ Date: _____

THIS PORTION TO BE COMPLETED BY REFERENCE

Please print your name: _____

The individual named above is applying for admission to Crossroads Christian Center Minister in Training Course. We rely on your reference to help us accurately appraise this prospective student. You can best serve this applicant by writing specific evidence of character and maturity, as well as frank evaluation of strengths and weaknesses that you have personally observed in his/her life. Please attach additional pages if necessary. Thank you for your careful attention to this important period of the applicant's life.

How long have you known the applicant? _____

How well do you know the applicant? Very well Rather well Casually Not well

In what capacity do you know the applicant? _____

Please check the degree to which this candidate demonstrates the following qualities:

	Excellent	Above Average	Average	Below Average	Do Not Know
Intellect					
Motivation					
Written expression					
Oral expression					
Initiative					
Independence					
Originality					
Leadership					
Self-confidence					
Warmth of personality					
Sense of humor					
Concern for others					
Reaction to criticism					
Social-emotional maturity					
Adaptability					
Judgment					
Responsibility					
Problem solving ability					
Cooperativeness					
Creativity					
Maturity					
Work ethic					
Submission to authority					

Please elaborate on any Below Average evaluations: _____

Can you conscientiously recommend the applicant for admission to Minister in Training Course?

Yes ___ No ___

If yes, please check one:

Enthusiastically With confidence With the following reservations (please explain):

If there is additional information you think we should know, please include below:

You may also include names and addresses of additional references which you believe will be helpful in evaluating the applicant:

I certify that the information given in this reference form is accurate to the best of my knowledge.

Signature: _____ Date: _____

Name of Organization: _____

Title/Position: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email address: _____

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