Life Transforming Ministries,
10303 Crown Point Ave,
Omaha , Nebraska 68134
admin@lifetministries.org

APPLICATION FOR ENROLLMENT

1. A non-refundable application fee of $ 25.00 must be attached.
   If application is denied, $25.00 will be refunded.
2. Please TYPE or PRINT CLEARLY. If the question does not apply,
   type N/A.
3. The persons completing the Pastoral and Personal
   Recommendations must return the forms directly to the address below.
4. Mail application with fee before ___/___/____ to LTM 10303 Crown Point Ave, Omaha, Nebraska 68134.

Office Use Only

Date Received_____
Check Number_____ Amount $_____
Recommendations Received:
Personal _____ (date)
Personal_____ (date)
Pastoral_____ (date)

A. Personal Data

_____

Name (Last) (First) (Middle initial) (Maiden Name)

_____

Present Address City Province/State Country
Code/Zip

_____

Telephone (with area code) E-Mail Address Fax Number

_____ ❑ Yes ❑ No

Social Security Number Gender Birth Date Age Citizen of this country?

Month/Day/Year If no, please provide Visa documents.

Marital Status (check those that apply)

❑ Engaged Fiancée's full legal name_____
❑ Married Spouse's full legal name_____
❑ Single ❑ Remarried ❑ Widowed ❑ Separated
❑Divorced

Is your spouse or fiancée in agreement with your decision to attend LTM?
❑ Yes ❑ No

B. CHURCH AFFILIATION

List the name of the church you currently attend.

_____

Name of Church | Senior Pastor | Telephone

_____

Address | City | Prov/State | Code/Zip

How long have you attended this church? _____
If less than one year, state the reason, and list the name of the last church you attended, including the pastor's name, address and phone number, how long you attended, and the reason for leaving.

_____

_____

If you are not currently involved in your local church, BRIEFLY explain on a separate sheet.
Are you ❑ Licensed ❑ Ordained If so, with what organization?

_____

C. STATEMENT OF FAITH

❑ Yes ❑ No Do you believe the Bible is the inspired Word of God and the only infallible guide in matters pertaining to conduct and doctrine?

❑ Yes ❑ No Do you believe in the Holy Trinity, that our God is one, but manifested in three persons; the Father, the Son and the Holy Spirit?

❑ Yes ❑ No Do you believe in the deity of the Lord Jesus Christ, that He is God made flesh, and He is the only mediator between God and man?

D. PASTORAL RECOMMENDATION

Give the Pastoral Recommendation form to your pastor for completion. Remember to sign the waiver at the top of the form first.

_____

NAME | Address

_____

City | Prov/State | Code/Zip | Telephone

E. PERSONAL RECOMMENDATIONS

Give the Personal Recommendation forms to individuals who have known you for at least 3 years (other than relatives).

_____

NAME Address

_____

City Prov/State Code/Zip Telephone

_____

NAME Address

_____

City Prov/State Code/Zip Telephone

F. ENROLLMENT INFORMATION

Date you were saved. _____ Were you raised in a Christian home? ❑ Yes ❑ No

BRIEFLY state how you know you are saved.

_____

_____

_____

Date you received the Baptism in the Holy Spirit with evidence of speaking in other tongues. _____

BRIEFLY state how you know you are filled with the Holy Spirit.

_____

_____

_____

BRIEFLY state why you want to attend Bible School.

_____

_____

_____

G. EDUCATIONAL HISTORY

❑ Yes ❑ No Can you read, write and comprehend the English language?

Education Circle the highest level attained.

1 2 3 4 5 6 7 8 9 10 11 12 GED Vocational/Technical 1 2 3 4

College 1 2 3 4 Master's _____ Specialist _____ Doctorate _____ Other_____

Beginning with High School, list educational institutions attended.

Name & Address of School	Dates	Major	Diploma or Degree

H. STATEMENT OF TRUTH

I hereby state that all the information contained in this application is correct and true. If the director is notified that any of the information contained on this application is false, it will be grounds for immediate dismissal.

_____

Signature Date

I understand that all items submitted to LTM as part of the application process become the permanent property of LTM and will not be returned or copied for the applicant's use.

_____

Signature Date

I. Please check Yes or No to answer the following questions.

❑ Yes ❑ No Have you ever been arrested?
If yes, please explain on a separate sheet of paper.

❑ Yes ❑ No Have you ever been convicted of a felony?
If yes, please explain on a separate sheet of paper.

❑ Yes ❑ No Have you ever been jailed or placed on probation?
If yes, please explain on a separate sheet of paper.

If you have answer yes to any of the following three (3) questions and use has occurred within the past year, please give an explanation including dates and details on a separate sheet of paper.

❑ Yes ❑ No Have you ever used any form of tobacco products?
If yes, when did you last use them? _____

❑ Yes ❑ No Have you ever used alcohol (including wine)?
If yes, when did you last use it? _____

❑ Yes ❑ No Have you ever used illegal or misused habit-forming drugs?

If yes, when did you last use them? _____

❑ Yes ❑ No Have you ever been involved with homosexuality/lesbianism?
If yes, give date(s) from _____ to _____
and explain on a separate sheet of paper.

❑ Yes ❑ No Have you ever been accused or investigated for child abuse, neglect, or molestation? If yes, please explain on a separate sheet of paper.

❑ Yes ❑ No Have you ever been accused or investigated for spousal abuse?
If yes, please explain on a separate sheet of paper.

We feel that in order for a person to assume a leadership role in the Christian ministry, the highest standards of personal conduct are expected. This includes abstinence from the use of tobacco, alcohol (including wine), and/or illegal or habit-forming drugs WHILE ATTENDING Bible School and AFTER GRADUATION.

Understanding our position on this matter, please indicate your decision concerning our policy.

❑ Yes, I will abide by this policy. ❑ No, I cannot abide by this policy.

I understand that is the director is notified that I have violated the above-stated policy, it will be grounds for immediate dismissal.

Signature _____ Date _____
If any changes occur after you sign this application, you must inform our office with details in writing.

❑ APPROVED	**FOR OFFICE USE ONLY**	❑ NOT APPROVED
_____		
Signature		Date