



**DESTINY & DOMINION
BIBLE TRAINING CENTER
STUDENT APPLICATION**

Photo

INSTRUCTIONS FOR COMPLETING APPLICATION ARE AS FOLLOWS:
(ALL OF THE FOLLOWING MUST BE COMPLETED
IN ORDER FOR THIS APPLICATION TO BE PROCESSED)

1. Place a recent photo in the area provided on the face of your application.
2. Enclose a \$50.00 non-refundable application fee.
3. All reference forms must be completed and returned to Admissions Office.
4. Answer all questions thoroughly. If a question does not apply, write "N/A".

PLEASE PRINT OR TYPE:

LAST NAME		FIRST		MIDDLE
Present Address		City	Province	Postal Code
Home Phone:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth:	Age:	Canadian Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Cell:		Month:		
Bus:		Day: Year:		
Email:		Date:		
		Height: ft _____ ins _____ Size : S M L XL XXL		

Marital Status (Check one) Single Engaged Married Remarried Widowed Separated

Name of Spouse or fiancé: _____ Date of Marriage: _____

Dependents for whom you are responsible:

Name	Age	Name	Age
_____		_____	
_____		_____	
_____		_____	

Yes No Is your spouse or fiancé saved and filled with the Holy Spirit?

How did you hear about Destiny & Dominion Bible Training Center?
D&D TV Radio Website Other _____

A. CHURCH AFFILIATION AND REFERENCES

CHURCH BACKGROUND – Identify the denomination, Name of the Church, which you currently attend.

Name of Church: -----

Address: -----
(Street) (City) (Province) (Postal Code)

Pastor Name: -----

Denomination: -----

How long have you attended this church? _____ years _____ month(s)

Are you a member? Yes No

Do you attend regularly? Yes No

If you have attended your present church less than one year, state the reason and include the name of your former church, pastor, and dates of attendance.

In what church activities are you currently involved?	In what church activities were you formerly involved?
How Long?	How Long?

If you are not currently involved in your local church, briefly state the reason and include the name of your former church, pastor, and dates of attendance.

B. STATEMENT OF FAITH

Are you Licensed? Ordained? Denomination/Organization -----

Yes No Do you believe that 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?

C. ENROLLMENT INFORMATION

1. Please state briefly why you want to attend D&D Bible Training Center.

2. Date you were saved: Month _____ Day _____ Year _____

Briefly relate your conversion experience in the space provided below:

3. Were you raised in a Christian home? _____

4. Date you received the baptism of the Holy Spirit with the evidence of speaking in other tongues:
Month _____ Day _____ Year _____

5. If you are married or engaged, is your spouse or fiancé (e) born again and filled with the Holy Spirit with the evidence of speaking in tongues? _____

In the time since your initial salvation experience, has there been a period when you did not live for the Lord?

Yes No If yes, briefly explain that period and include dates.

D. EDUCATIONAL HISTORY

EDUCATION: (Circle highest level attained)

1 2 3 4 5 6 7 8 9 10 11 12 GED VOCATIONAL/TECHNICAL 1 2

University: 1 2 3 4 Masters Doctorate Specialist Other_____

Beginning with High School, list all educational institutions attended. **DIPLOMA OR TRANSCRIPT REQUIRED.**

Name of Schools	Dates	Majors	Diploma or Degree

Will you be applying for a transfer credit from another institution? Yes No

Are you applying to other colleges/universities? Yes No

Name of college or university _____

TRANSCRIPTS – Please attach Transcripts; Certificates; or Diploma of previous High School, College, University or Trade Schools attended.

(If you are at least 19 years old and applying as a mature student, you may need proof of age).

E. OCCUPATIONAL AND PROFESSIONAL HISTORY

OCCUPATION – Please list your previous work experience starting with PRESENT employer.

Name of Employer	Duties	Date

List special occupational or professional skills you possess.

F. FINANCIAL HISTORY

Yes No Have you declared bankruptcy within the last five years? (If yes, explain the origin, cause, amount, dates, type of bankruptcy, and present status.

The administrators of Destiny & Dominion Bible Training Center are fully aware that God is able to supply all the needs of our student body. Many Christians with great potential have faltered and brought much reproach to the Kingdom of God by the improper handling of their finances. Thus, we desire that you identify how you plan to pay expenses. Be specific with the amounts you have on hand now.

- Own employment
- Spouse employment
- Parents: Amount of support promised
- Saving: Amount on deposit
- Child support or alimony
- Other: _____

G. ALCOHOL, TOBACCO, ILLEGAL DRUGS

The following answers should be based on actual FACT and not FAITH.

Are you currently a smoker? Yes No

If no, when did you stop? _____

Have you ever abused alcohol? Yes No

Are you currently using illegal or habit-forming drugs? Yes No

If yes, what illegal or habit-forming drugs: _____

Date you were delivered from illegal or habit-forming drugs if applicable: _____

H. CRIMINAL RECORD

Do you have a past criminal record? Yes No If Yes, attach letter explaining.

I. HOMOSEXUALITY - LESBIANISM

Yes No Have you ever been involved with homosexuality / lesbianism

If yes give dates: From _____ to _____

(if yes, give a brief explanation of what your beliefs were while you were involved, why you became involved and what your beliefs are now.

J. MEDICAL CONSENT

I hereby grant permission to Destiny & Dominion Bible Training Center, or its consulting physician, to render me to any emergency treatment, medical or surgical care that might be deemed necessary; also, when necessary for executing such care, I grant permission for hospitalization at an accredited hospital.

You Must Circle YES or NO and sign.

YES NO Signature: _____

If applicant is under 18, the signature of parent or guardian is required.

K. EMERGENCY INFORMATION

Nearest relative (NOT husband or wife) to be notified in case of emergency:

Name:	Relationship:	Phone:	
Address:	City:	Province:	Postal Code:

L. STATEMENT OF TRUTH

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

Signature _____ Date _____

I hereby state that all the information contained on this application is correct and true. If Destiny & Dominion Bible Training Center is notified that any of the information contained on the application is false, it will be grounds for immediate dismissal.

Signature _____ Date _____