

**Mr/Mrs/Miss (delete as applicable)**

**Full Name:**

**Address** (incl. postal code):

**Tel. No. (Daytime/ Evening):**

**Email:**

**Date of Birth:**

**Current Employment** (if your situation is about to change please provide details of your intended employment during the next academic year)**:**

**List the course or courses for which you are applying:**

**\_\_\_\_\_\_\_ Gospel Living (Sept. 19 – Oct. 17, 2015)**

**\_\_\_\_\_\_\_ Understanding God’s Story (Nov. 7 – Dec. 5, 2015)**

**\_\_\_\_\_\_\_ Keeping It Missional (Jan. 9 – Feb. 6, 2016)**

**\_\_\_\_\_\_\_ Apologetics (March 5 – April 2, 2016)**

**What is your home church? Please list the name and phone number of one of your church leaders who would recommend you for this training:**

**What involvement or position do you have in your local church?**

**In a few words, how would you describe your character and temperament?** (strengths and weaknesses)

**What would you see as your main gifts?**

**How would you define your general theological position?**

**Summarize in a few words your position on:**

* **the authority of Scripture**
* **the work of the cross**
* **the sovereignty of God**

**What would you hope to gain from the Learning course?**

**What is your probable long-term future in terms of Christian ministry?**

**List two cohorts if known (individuals with whom you will share what you are learning, and hold you accountable or work alongside you).** Please include postal and email address if applicable. If you do not have preselected cohorts, you will be placed in a group at the opening class. There may be situations where your cohorts are not actually taking the course, but ideally, they should be taking or have taken the course.

1. **2.**