



Thank you for your interest in the North Coast Church School of Ministry! Our purpose is to provide the knowledge, skills, experiences and coaching to fulfill your life purpose and maximize your God given gifts for God's kingdom.

STUDENT APPLICATION INSTRUCTIONS

- 1. Application:** Please complete all questions in this application packet. If a question does not apply, you may write N/A (not applicable). When finished, please sign and date the form to avoid any delay in the processing of your application.
- 2. Recommendations:** We would like to have two recommendations for your enrollment into our program.
 - a. Personal:** Please provide North Coast Church with one personal recommendation. This letter must be completed by a mature Christian adult who has known you for at least one year and is not a relative.
 - b. Pastoral:** The pastoral recommendation form must be completed by a pastor (non-relative) from your home church (this can be your youth pastor). Please choose a pastor who knows you well and can provide us with the most complete picture of who you are.
- 3. A non-refundable application fee** of \$35.00 is required with your application.
- 4. Photograph:** Please attach a clear, head and shoulder photo.

NOTE: ALL of the above must be turned in for your application to be considered.

Complete all following questions to the best of your knowledge. Please Print.

FULL LEGAL NAME _____

NAME YOU GO BY _____ GENDER **M** **F**

CURRENT ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL _____

PRIMARY PHONE _____

AGE _____ DATE OF BIRTH / /



FAMILY INFORMATION

PARENT / LEGAL GUARDIAN _____

PHONE _____

CURRENT ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL _____

PLEASE LIST THE NAMES AND AGES OF ANY SIBLINGS, SPOUSE AND/OR CHILDREN

EDUCATIONAL HISTORY

HIGH SCHOOL EXPERIENCE

DID YOU GRADUATE FROM HIGH SCHOOL? YES NO

SCHOOL _____

CITY _____ STATE _____

IF "NO", DO YOU HAVE A G.E.D.? YES NO DATE / /
OF GRADUATION/G.E.D.

COLLEGE EXPERIENCE

ARE YOU CURRENTLY ATTENDING COLLEGE? YES NO

IF YES, WHERE? _____

MAJOR _____

ARE YOU PLANNING TO ATTEND COLLEGE NEXT FALL? YES NO

IF YES, WHERE? _____

HAVE YOU PREVIOUSLY ATTENDED COLLEGE? YES NO

IF YES, WHERE? _____

MAJOR _____

YEARS COMPLETED _____ CITY / STATE _____



RELIGIOUS BACKGROUND

HOW LONG HAVE YOU BEEN A CHRISTIAN? _____

PLEASE GIVE US YOUR PERSONAL TESTIMONY: *WHAT IS YOUR RELATIONSHIP WITH CHRIST? PLEASE DESCRIBE YOUR SPIRITUAL JOURNEY IN DETAIL. (ATTACH ADDITIONAL SHEETS IF NECESSARY)* _____

CHURCH WHERE YOU PRESENTLY ATTEND _____

CHURCH ADDRESS _____

YEARS OF ATTENDANCE _____

NAME OF PASTOR THAT KNOWS YOU _____

PHONE _____

IF ANOTHER PASTOR FROM HERE OR A DIFFERENT CHURCH KNOWS YOU BETTER, PLEASE SUBMIT HIS NAME, ADDRESS, AND PHONE NUMBER.

NAME _____

ADDRESS _____

PHONE _____

WHAT IS YOUR PATTERN OF CHURCH ATTENDANCE? _____

WHAT MINISTRY EXPERIENCE, LEADERSHIP OR MENTORING ROLES, IF ANY, HAVE YOU HAD IN YOUR CHURCH OR HIGH SCHOOL FELLOWSHIP?

LIST ALL OF THE MINISTRIES YOU ARE CURRENTLY INVOLVED IN, OR HAVE PARTICIPATED IN, DURING THE LAST YEAR: _____

WHAT ARE YOUR HABITS REGARDING YOUR DEVOTIONAL LIFE? _____

LIST YOUR STRENGTHS, SKILLS, GIFTS, AND/OR TALENTS: _____

IN WHAT AREA OF YOUR CHRISTIAN WALK DO YOU MOST WANT TO IMPROVE OR GROW RIGHT NOW? _____



PERSONAL ASSESSMENT

WHO HAS BEEN THE MOST INFLUENTIAL PERSON IN YOUR LIFE?
IN WHAT WAY? _____

WHAT TENDS TO UPSET YOU THE MOST? _____

HAVE YOU EVER EXPERIMENTED WITH ILLEGAL DRUGS OR ALCOHOL?
 YES NO IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER STRUGGLED WITH PORNOGRAPHY? YES NO
IF YES, PLEASE EXPLAIN _____

HAVE YOU BEEN COMMITTED TO, AND MAINTAINED, SEXUAL PURITY?
 YES NO IF NO, PLEASE EXPLAIN: _____

DESCRIBE YOUR APPROACH TO FACING AND OVERCOMING OBSTACLES TO
ACHIEVE YOUR GOALS AND INTENTIONS: _____

IS THERE ANYTHING ELSE IN YOUR PERSONAL HISTORY THAT WOULD BE
GOOD FOR US TO KNOW? _____

	POOR	AVERAGE	ABOVE AVERAGE	OUTSTANDING
LISTENING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SPEAKING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
READING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
WRITING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



HOBBIES AND ACTIVITIES

LIST YOUR HOBBIES AND INTERESTS:

LIST ANY VOLUNTEER WORK OR COMMUNITY ACTIVITIES IN WHICH YOU HAVE PARTICIPATED DURING THE PAST YEAR: _____

GOALS AND ASPIRATIONS

EXPLAIN YOUR PURPOSE AND PERSONAL GOALS FOR ATTENDING THE NORTH COAST CHURCH SCHOOL OF MINISTRY _____

WHERE DO YOU SEE YOURSELF IN FIVE YEARS?

FOR WHICH AREA OF MINISTRY ARE YOU MOST INTERESTED IN DEVELOPING LEADERSHIP SKILLS? PLEASE SELECT ONE:

- YOUTH MINISTRY WORSHIP MINISTRY GENERALMINISTRY
- CHILDREN'S MINISTRY MEDIA PRODUCTION (video, tech, lighting, sound, web or IT)
- YOUTH CREATIVE TEAM (PHOTO/VIDEO PRODUCTION)

AGREEMENT

TO THE BEST OF MY KNOWLEDGE, MY RESPONSES ON THE APPLICATION ARE TRUE AND ACCURATE. MY SIGNATURE INDICATES MY AGREEMENT WITH THESE STATEMENTS.

SIGNATURE _____ **DATE** _____



PASTORAL REC.

APPLICANT COMPLETES SECTION

THE PASTORAL RECOMMENDATION FORM MUST BE COMPLETED BY A PASTOR (NON-RELATIVE) FROM YOUR HOME CHURCH. PLEASE CHOOSE A PASTOR (SUCH AS YOUR YOUTH PASTOR) WHO KNOWS YOU WELL AND CAN PROVIDE US WITH THE MOST COMPLETE PICTURE OF WHO YOU ARE.

DATE / /

APPLICANT'S NAME _____

CURRENT ADDRESS _____

PHONE _____

EMAIL _____

APPLICANT'S SIGNATURE _____ DATE _____

DEAR PASTOR,

THE ABOVE INDIVIDUAL HAS APPLIED FOR ADMISSION TO THE NORTH COAST CHURCH SCHOOL OF MINISTRY. THE NORTH COAST SCHOOL OF MINISTRY IS DESIGNED TO EQUIP STUDENTS WITH LIFE SKILLS AND DEVELOP LEADERSHIP FOR A LIFE IN MINISTRY. FOR OUR PROGRAM, WE ARE SEEKING CANDIDATES WHO ARE COMMITTED TO SPIRITUAL, INTELLECTUAL, AND PERSONAL GROWTH; WHO WISH TO DEVELOP SKILLS THAT WILL PREPARE THEM FOR LIFE; FEEL A CALLING TO FURTHER THE KINGDOM OF GOD; AND ARE DEDICATED TO SERVING THE LORD. WE WOULD APPRECIATE YOUR HELP AS WE SEEK TO EVALUATE THE APPLICANT'S SUITABILITY TO OUR PROGRAM. YOUR OBSERVATIONS AND RECOMMENDATION ARE IMPORTANT TO US. WE WANT YOU TO KNOW YOUR INPUT WILL BE KEPT IN STRICT CONFIDENCE.

THANK YOU FOR YOUR PROMPT ASSISTANCE. ONCE COMPLETED, THE FORM SHOULD BE MAILED OR DELIVERED DIRECTLY TO:

NORTH COAST CHURCH SCHOOL OF MINISTRY, ATTN. KATIE JOHNSON
2405 NORTH SANTA FE AVENUE
VISTA, CA 92084
(760) 724-6700



QUESTIONS REGARDING APPLICANT (continued)

WHAT DO YOU CONSIDER TO BE THE APPLICANT'S STRENGTHS?

Three horizontal lines for writing strengths.

WHAT DO YOU CONSIDER TO BE THE APPLICANT'S WEAKNESSES?

Three horizontal lines for writing weaknesses.

HOW DOES THE APPLICANT DEAL WITH STRUGGLES OR SET-BACKS?

Three horizontal lines for writing about struggles or set-backs.

WHAT AREAS OF GROWTH HAVE YOU PERSONALLY OBSERVED IN THE APPLICANT'S LIFE?

Three horizontal lines for writing areas of growth.

PLEASE ADD ANY FURTHER COMMENTS YOU MAY HAVE WHICH WOULD HELP IN OUR SELECTION OF THIS CANDIDATE:

Three horizontal lines for further comments.



- Radio button options: STRONGLY RECOMMEND, RECOMMEND, RECOMMEND WITH RESERVATION, DO NOT RECOMMEND

WHY OR WHY NOT? _____

SIGNATURE _____ DATE _____

THANK YOU FOR YOUR HELP. WE APPRECIATE THE TIME YOU HAVE TAKEN AND PROMISE TO MAINTAIN THE CONFIDENTIALITY OF YOUR RESPONSES.