

# Admission Application



One-time admission fee of **\$15** required.

STUDENT ID #

## PERSONAL INFORMATION

LAST NAME:

FIRST NAME:

MAIDEN NAME::

STREET ADDRESS:

CITY:

STATE/PROVINCE:

EMAIL ADDRESS:

PHONE  
NUMBER:

DATE OF BIRTH:

MARITAL  
STATUS:

Single  
Married  
Divorced  
Widowed

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## EDUCATION

List your previous schools, beginning with the most recent.

NAME OF SCHOOL:

STREET ADDRESS:

CITY:

STATE:

FIRST ATTENDED:

LAST ATTENDED:

GRADUATED:

**Degree Earned**

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NAME OF SCHOOL:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

FIRST ATTENDED:

LAST ATTENDED:

GRADUATED:

G.P.A.:

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NAME OF SCHOOL:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

FIRST ATTENDED:

LAST ATTENDED:

GRADUATED:

G.P.A.:

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### MINISTRY INFORMATION

PRESENT MINISTRY:

HOW LONG?:

NATIONAL MINISTRY:

HOW LONG?:

AFFILIATION

LOCAL  
CHURC  
H:

PASTOR'S NAME:

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### CHRISTIAN EXPERIENCE

DATE OF SALVATION:

DATE OF WATER BAPTISM:

BAPTISM IN HOLY SPIRIT:  
(with evidence of speaking in tongues)

Yes  
No

CREDITIALS:

Christian Workers  
Exhorter  
License to Preach  
Ordained

BRIEF EXPLANATION OF DESIRE TO STUDY WITH CST:

MINISTRY AND EDUCATION GOALS:

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**SIGNATURES**

APPLICANT:

DATE:

GENERAL SUPERINTENDENT:

DATE:

C.E DIRECTOR:

DATE:

CST REP:

DATE:

CST PRESIDENT/DEAN:

DATE: