



Dear Atlanta SOM Applicant,

We are excited that you have taken the time to apply to the ASOM Online. If you have any questions, please call 404.692.4402. We have courses that begin in September and January. Please call for more information..

On the last page of the application, please remember to circle which session you are applying for.

Once you have completed the application, place it in an envelope along with a **typed or neatly written testimony** (500-words or less), a photo, and the \$50 application fee.

(Note: the fee is non-refundable).

Everything may be mailed to the ATL SOM offices: (address below)

Atlanta School of Ministry
PO Box 54532
Atlanta, GA 30308

After we have received your application, an individual from the School of Ministry staff will contact you and set up a phone interview. After this is completed the staff will pray over your application, asking for God's leading and His will for your life in this season.

Thank you for considering the Atlanta School of Ministry,

Atlanta School of Ministry Staff

ATLANTA

SCHOOL OF MINISTRY

OFFICIAL APPLICATION

PERSONAL INFORMATION

Full Name _____

Present Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Email _____

Birth Date _____ Age _____

Facebook Address: www.facebook.com/ _____

Marital Status (circle one) Single Married Divorced if married or divorced, how long? _____

Note: Please submit a second application for spouse if both are applying

FAMILY BACKGROUND

Name of Father/Guardian _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Accepted Christ? Yes No

Occupation _____

MEDICAL BACKGROUND

Have you ever used Illegal drugs? Yes No Dated last used _____

Have you ever used tobacco? Yes No Date last used _____

Have you ever consumed alcohol? Yes No Date last used _____

EMPLOYMENT HISTORY

Present Employer _____

Position _____ Date Hired _____

Past Employer _____

Position _____ Date Hired _____

Quit Laid Off Fired Other _____

Course Payment Plan (Courses must be paid in full before receiving access to online course.)

How do you plan to pay for your course?

CHURCH BACKGROUND

Name of Home Church _____ Denomination _____

Address _____

City _____ State _____ Zip Code _____

Senior Pastor _____ Youth Pastor _____

How long have you attended this church? _____

List the different ministries you are involved in:

Are you a member of this church? Yes No

When did you accept Christ? _____ Where? _____

Have you been baptized with water? Yes No

Have you had an Acts 2:4 experience? Yes No

How many times a week do you attend church? _____

References: (Must include a pastor as a reference) [Name. Relation. Phone Number]

CHURCH BACKGROUND CONTINUED

What is your definition of church?

GENERAL QUESTIONS

How did you hear about ASOM? _____

What size t-shirt do you wear? S M Lg XL XXL 3XL

Which session are you applying for? January September

I HAVE HONESTLY COMPLETED THIS APPLICATION FORM AND HAVE ANSWERED THE QUESTIONS TO THE BEST OF MY ABILITY AND if accepted, I agree to take full responsibility of paying the total tuition. I understand that I am responsible for the vehicle, if I choose to bring one, including maintenance, insurance, etc. I agree to provide a current DMV record, proof of insurance, and a copy of my driver's license. I agree to cover all expenses and damages if I am borrowing a vehicle and have an accident or receive a citation

Print Name: _____ Date: _____

Signature: _____

DON'T FORGET TO INCLUDE

- 1. Personal Testimony
- 2. Photo
- 3. \$50 Application fee