

APPLICATION FOR STUDY - Page 1

ALPHA INSTITUTE OF MINISTRY

Name: _____

Street Address: _____

Home Phone: _____

Work Phone: _____ Cell: _____

E-mail: _____

Website or Facebook: _____

Date of Birth (d/m/y): _____ / _____ / _____ Gender: F _____ M _____

Country of Residence: _____

Area of Study:

- 1-Year Certificate in Christian Service
- 2-Year Diploma in Christian Service & General Ministry
- Advanced Qualification in Biblical Study

FINANCIAL AID:

Do you seek Financial Aid? Yes No

Do you seek a Y.E.S. Grant or Loan? Yes No

Note: Alpha Institute of Ministry does not discriminate on the basis of race, color, sex, age, religion, marital status, disability, national or ethnic origin, or socio-economic status.

EDUCATION:

What is your highest level of education? _____

List Below the last schools attended:

SCHOOL	LOCATION	DATE	QUALIFICATIONS
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EMPLOYMENT EXPERIENCE: List last three positions: (Start with current)

DATES	EMPLOYER/ADDRESS	POSITION
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REFERENCES: References are required as part of the admission process. Please give names and complete addresses of references.

Professional/Education Reference:

Character Reference:

Signature of Applicant

Remember to sign your printed application form.
Submit \$100 application fee and mail to:

Attn: Helen Desaine
Office of the Registrar
Alpha Institute of Ministry
LP#4 Bedessie Street
St Augustine, Trinidad & Tobago