

M:28 International School of Ministry
SCHOOL YEAR 2011- 2012

Enrolment Application Form

(please check one)

1st Year Student 2nd Year Student

Please check one:

A member of The Harvest Church

Other Church Affiliation - Please specify your church or organization on the line below:

Personal Information

Last Name: _____ Middle Initial: _____

First Name: _____

Address:

City: _____ State: _____ Zip: _____ Country if outside
USA: _____

Telephone Number: (____) _____

Email Address: _____

Educational Information

High School: _____

City: _____ State: _____ Year Graduated: _____

College: _____

City: _____ State: _____ No. of hours completed and or year

Graduated: _____

Signature

