

# Family of Faith College International Student Enrollment Application

*Family of Faith College and those persons acting in official capacities on behalf of the college will not discriminate in hiring practices, enrollment procedures, or administrative policies against any person on the basis of race, color, national origin, sex, or physical disability.*

All international students must take at least 12 credit hours every semester. Dropping below full-time can put a student's visa status in jeopardy.

**PLEASE TYPE OR PRINT ALL INFORMATION**

Legal Name \_\_\_\_\_  Male  Female  
Surname/Family First/Given Name Middle Name

Usually Called \_\_\_\_\_ Birth Date \_\_\_\_\_ Passport # \_\_\_\_\_  
Month / Day / Year

Mailing Address \_\_\_\_\_  
Number and Street Apt. # City State/Province Country Postal Code

Telephone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Country of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_

**Race**

- White / Caucasian
- Black
- Oriental
- Hispanic
- Native American
- East Indian
- Other \_\_\_\_\_

**Current Marital Status (Check All That Apply)**

- Never Married
- Married
- Widow / Widower
- Separated\* \*Please send a letter of explanation with your application.
- Divorced\*
- Remarried\*
- Single Parent\*

**Entrance Date**

Fall (August - December) Year \_\_\_\_\_

Spring (January - May) Year \_\_\_\_\_

Are you applying for a resident hall reservation?  
 Yes  No - If no, please explain your housing plans.

**Program Choice**

- B.A. in Church Ministry
- B.A. in Church Ministry - Business Emphasis
- B.A. in Education
- Certificate in Church Ministry (2-year)

**FAMILY AND EMERGENCY CONTACT INFORMATION**

Father \_\_\_\_\_ Occupation \_\_\_\_\_

Permanent Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

Mother \_\_\_\_\_ Occupation \_\_\_\_\_

Permanent address \_\_\_\_\_ Telephone Number \_\_\_\_\_

**CHURCH MEMBERSHIP**

Have you trusted Jesus Christ as your Savior?  Yes  No If Yes, when? \_\_\_\_\_

Have you received the infilling of the Holy Spirit?  Yes  No

Which church do you regularly attend? \_\_\_\_\_  
Church Name City

Who is your pastor? \_\_\_\_\_ Phone Number \_\_\_\_\_

# Family of Faith College - International Student Enrollment Application – Page 2

## EDUCATIONAL INFORMATION

Name of School (Please Indicate If Home Schooled) \_\_\_\_\_ Telephone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Province/Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Graduation Date or Expected Graduation Date (Month/Year) \_\_\_\_\_ Name of Reference from the Institution \_\_\_\_\_

If you are home schooled, who is keeping your academic records? \_\_\_\_\_

Please list all colleges, Bible institutes, or technical schools you have attended. If more than two schools have been attended, submit additional school information on a separate sheet. If you plan to transfer credits from another college, you must have an official copy of your transcript/school record on file at Family of Faith College before the Registrar's Office can evaluate any credits for possible transfer. It is your responsibility to request the institution to send an official transcript directly to Family of Faith College.

Name of School \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degree Received \_\_\_\_\_ Name of Reference \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Province/Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Name of School \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degree Received \_\_\_\_\_ Name of Reference \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Province/Country \_\_\_\_\_ Postal Code \_\_\_\_\_

### CONFIDENTIAL

Check appropriate box

- |                               |                             |  |
|-------------------------------|-----------------------------|--|
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Have you any significant physical impairment?  |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Have you ever used illegal or dangerous drugs?   |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Do you in any way use alcoholic beverages?   |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Do you use tobacco in any form?  |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Were you ever expelled, dropped, or suspended by any school or college?                                    |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Are you now, or have you ever been, under the supervision of a parole officer or court?                    |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Have you ever been arrested for any reason other than a minor traffic violation?                           |
| <input type="checkbox"/> Yes* | <input type="checkbox"/> No | Have you ever been treated for any nervous, mental, or emotional disorder, or been seen by a psychologist? |

\*If the answer is affirmative, please give complete details on a separate sheet of paper. An explanation may also be needed from the doctor, principal, court, or parole officer. Family of Faith College requires each student to observe its Statement of Faith and College Covenant.

### IF ENGLISH IS NOT YOUR FIRST LANGUAGE

You must take the Test of English as a Foreign Language (TOEFL) and include the documentation with this application. TOEFL Test Date \_\_\_\_\_ Score \_\_\_\_\_

How many years have you studied English in school? \_\_\_\_\_

### MEDICAL INSURANCE

Purchasing health/medical insurance prior to arriving in the United States is recommended since it is not readily available for foreign students. Would you like more information?  Yes  No

### SIGNATURE

I certify that the information given on this application is complete and accurate. If I am admitted as a student at Family of Faith College, I agree to comply with the college's academic and behavioral standards.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

**All enrollment documents and procedures must be completed prior to being considered for approval.**

*Mail to: Director of Admissions, Family of Faith College, P.O. Box 1805, Shawnee, OK USA 74802-1805*