



# ***School of Supernatural Ministry and Mission***

## **APPLICATION FORM**



Please either attach a photo here or email a digital photo to [ssmm@allnationscentre.co.uk](mailto:ssmm@allnationscentre.co.uk) with your full name and date of birth.

Date of Application: \_\_\_\_\_

**I am applying for:**

Full 5 Month School     The School of the Heart (1<sup>st</sup> Month)

**If you are applying for the 'The School of the Heart' only please complete pages 1 & 2 of this form and the separate form titled 'The School of the Heart Application form'.**

### **PERSONAL INFORMATION**

Full Name: (Mr/Mrs/Miss) \_\_\_\_\_

Telephone numbers:

Home No. \_\_\_\_\_ Work No. \_\_\_\_\_

Email \_\_\_\_\_

**Current Address:**

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**Permanent Address:**

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Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Sex:  Male  Female

Status:  Single  Engaged  Married  Remarried

Divorced  Separated  Widowed

Spouse's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ (*prospective date if engaged*)

Names and ages of your children:

\_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

### INTERESTS

Please indicate your areas of interest by placing a tick next to the relevant categories. If you would like to give more information about your interests please use a separate piece of paper.

Children \_\_\_\_\_

Youth \_\_\_\_\_

Men's Ministry \_\_\_\_\_

Women's Ministry \_\_\_\_\_

Marriage \_\_\_\_\_

Single Parents \_\_\_\_\_

Ministry Team \_\_\_\_\_

Evangelism & Connections \_\_\_\_\_

Worship \_\_\_\_\_

Graphic Design \_\_\_\_\_

Admin \_\_\_\_\_

Other (please give details) \_\_\_\_\_



**(The following part of the form is to be completed by applicants applying for the full 5 month course)**

**LIFE HISTORY**

Please answer the following statements/questions for each of the four category headings on a separate piece of paper, typed answers are preferred. Please answer as completely as possible.

**Spiritual growth**

- a. Give a brief outline of your salvation, water baptism, and baptism in the Holy Spirit including dates.
- b. Describe your spiritual growth since that time. Comment on events or spiritual experiences in your life, which led to new levels of understanding and commitment. Include the character issues that God has dealt with in your life and what lessons they taught you.
- c. Comment on your devotional life. Include such issues as prayer, Bible reading, Bible study, worship, devotions.
- d. Are you meeting your expectations for personal spiritual growth?

**Relationships and experience**

- e. Please describe your relationship with your local congregation. Comment on areas of ministry, service, leadership experience, gifts and abilities.
- f. Please describe your relationship with your mother and your father.
- g. Briefly describe your relationship with the rest of your family.
- h. How does your family feel about your intentions to attend the School of Supernatural Ministry and Mission?
- i. What languages do you speak and how proficiently?

**Goals and expectations**

- j. Comment briefly on the circumstances that led up to your decision to apply for this school.
- k. What are your reasons for wanting to attend this school? Please include spiritual and ministry goals, missionary and church service goals, which you hope the school will help you fulfil.
- l. Briefly, what are your plans following the school?

**God's work**

- m. How do you know that the Holy Spirit is working in your life?
- n. Have you ever experienced a miracle in your life? Please describe it.
- o. What do you think your spiritual gifts are? Do you have the opportunity to exercise these gifts in your local congregation?

If you have any other relevant information that you feel we should take into consideration when looking at your application, please include it when answering the above questions.



**EDUCATION/WORK HISTORY**

Please give a brief account of your education and/or work history since leaving school:-

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**HEALTH**

Please give details of any aspect of your health that you feel we should be aware of before you begin the course:-

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**Declaration**

I enclose a deposit of £25 with my application (cheques made payable to 'LCF') and I agree to pay the full School fees if I am accepted on to the course.

Signed \_\_\_\_\_



## REFERENCE FORMS (for the full 5 month School only)

### We require

1. One reference from your Pastor
2. One reference from a responsible person

*Your application will NOT be processed until we receive both your reference forms. Please ensure that all your referees complete and send them into our office as soon as possible.*

### Pastoral Reference

Enclosed is a reference form and letter for you to give to your pastor. We want to invite his/her counsel and input with regards to your application.

Name of Congregation \_\_\_\_\_

Denomination (if applicable) \_\_\_\_\_

Pastor's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_

Is your Pastor in agreement with your plans?  Yes  No

How long have you attended this congregation? \_\_\_\_\_

How would you describe your relationship with your Pastor?

\_\_\_\_\_

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### Responsible Person Reference

Please give the details of the person to whom you gave your reference form.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone No. \_\_\_\_\_

Please return all forms to:-

Liz Carvell, SSMM, All Nations Centre, 10 Frog Island, Leicester, LE3 5AG.



## School of the Heart Application Form

School of the Heart will run during the first month of the School of Supernatural Ministry and Mission. Applicants may apply for the first month only if so desired. The cost of School of the Heart is £170.

Please complete this form and pages 1 and 2 of the 'School of Supernatural Ministry and Mission' application form.

Applicants Full Name \_\_\_\_\_

1. Please give a brief outline of your salvation, water baptism, and baptism in the Holy Spirit including dates:-

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2. What are your reasons for wanting to attend The School of the Heart (one month only)?

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Please return all forms to:-

Liz Carvell, SSMM, All Nations Centre, 10 Frog Island, Leicester, LE3 5AG

