



**Ministry Training Institute**  
 a missions and evangelism training ministry of  
**The Association Free Lutheran Bible School**  
 3134 East Medicine Lake Boulevard  
 Plymouth, Minnesota 55441-3008  
 (763) 544-9501

Attach a recent photo of yourself here & enclose 1 additional photo.  
  
 Write name on back of photos.

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Former \_\_\_\_\_ M  F  Social Security Number \_\_\_\_\_

Mailing Address: Number & Street \_\_\_\_\_ City/State/Zip \_\_\_\_\_ Country \_\_\_\_\_ Phone \_\_\_\_\_ ( )

Permanent Address: Number & Street \_\_\_\_\_ City/State/Zip \_\_\_\_\_ County \_\_\_\_\_ Phone \_\_\_\_\_ ( )

Birthplace: City/State \_\_\_\_\_ Country of Citizenship \_\_\_\_\_ U.S. Immigration Status \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Name of Parent(s) or Guardian(s) \_\_\_\_\_ Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_ ( )

Indicate Marital Status:  
 Single     Married    Have you been divorced? If yes, give date \_\_\_\_\_ Do you have children? If yes, number & ages of children \_\_\_\_\_  
 Engaged     Widowed     Yes     No    \_\_\_\_\_     Yes     No    \_\_\_\_\_

Spouse's Full Name (Fiancée or Fiancé, if engaged) \_\_\_\_\_ Age \_\_\_\_\_ Wedding Date \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_

What church do you attend? \_\_\_\_\_ Are you a member? \_\_\_\_\_ How long have you regularly attended? \_\_\_\_\_ Denomination and/or conference \_\_\_\_\_

Church Mailing Address: Number & Street \_\_\_\_\_ City/State/Zip \_\_\_\_\_ Pastor's Name \_\_\_\_\_

**On a separate sheet of paper, write a 300 - 400 word essay: Describe your salvation experience and your relationship to Jesus Christ. Tell us why you feel the Lord is calling you to enroll in the AFLBS Advanced Ministry Training Program. Into what kind of ministry do you sense the Lord is calling you after this year of training and internship?**

Which study tract are you applying for?     Cross-Cultural Ministry     Youth Ministry     Mission Aviation

**Education**

High School \_\_\_\_\_ City/State \_\_\_\_\_ Graduation Year \_\_\_\_\_

Advanced Ministry Training enrollees are required to be graduates of Bible school. List your Bible school credentials and any other universities, colleges, or community colleges attended in order of attendance (no exceptions). Have transcripts sent to AFLBS.

Bible school, College or University	Dates Attended	Approx. Credits, Degree or Diploma
1. _____	From _____ To _____	_____
2. _____	From _____ To _____	_____
3. _____	From _____ To _____	_____

## Personal

What persons, events or information influenced you to apply? (List in order of greatest influence.) \_\_\_\_\_

Is there any reason you may not return to any collegiate institution previously attended?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you ever been charged with any crime involving sexual misconduct?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you previously applied to MTI for Admission?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you ever been convicted of any crime involving sexual misconduct?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Within the past year, have you used alcoholic beverages?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Within the past year, have you used tobacco?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Within the past year, have you used illegal drugs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Have you been judged guilty of criminal or civil offenses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

If yes to any of the above, please explain. \_\_\_\_\_

Is there anything in your past about which the Bible school should know before you begin this ministry training? Please explain. \_\_\_\_\_

I prefer to room with \_\_\_\_\_ I am willing to live in a three-person room.  Yes  No  
I am willing to abide by the student guidelines while I am enrolled in the program.  Yes  No  
Will you have a car on campus?  Yes  No If yes, Make/Model \_\_\_\_\_

## Financial

How do you plan to finance your education at MTI? \_\_\_\_\_

Funds Available for MTI: \$ _____	Please sign your initials after the following statements: I understand that I will need to pay \$1800 down (tuition is \$1500/semester) before I begin the program. _____ I understand that I cannot leave on my missions internship until I have paid my student account in full. _____ I understand that I will have to pay or raise approximately an additional \$2000 to finance my mission internship. _____
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## Occupational Experience

Type of work you have some experience in: \_\_\_\_\_

Do you plan to work part-time while in school?  Yes  No

## References

List below three persons who will complete recommendation forms for you. They should include your pastor, a spiritual mentor (an older adult who has had a godly influence upon your life), and an employer, teacher, administrator or school counselor who know you well (two years or more). Do not list relatives. Please give COMPLETE addresses.

Name	Address	City	State	ZipCode
1. _____ Pastor				
2. _____ Spiritual Mentor				
3. _____ Employer, Teacher, Administrator or School Counselor				

## Admission Statement

Among the conditions of admission are the following:

1. Ministry Training Institute admits qualified applicants regardless of sex, race, color, national origin or handicap who are personally committed to faith in Jesus Christ. Students should have a two-year diploma from Association Free Lutheran Bible School or its equivalent.
2. Applicants are selected for admission on the basis of spiritual, educational, personal and financial qualification.
3. Enrolled students are expected to attend classes and required devotional sessions regularly, to engage in Christian service, to participate in a local church of their choice and to enter heartily into fellowship with the school family.

My signature below indicates that all information in this application is honestly presented, factually correct and complete. I understand that failure to submit complete official transcripts from all schools, colleges, or universities attended may result in the denial of this application or my subsequent dismissal from MTI. As a student of MTI, I will seek to live the Christian life in accordance with accepted practices and above all to be pleasing to the Lord Jesus Christ.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*A non-refundable application fee of \$20 must accompany this form.*

*This fee is waived if you mail the application before December 1 of the year previous to your enrollment.*

**Mail to: Admissions Office, Ministry Training Institute, 3134 E Medicine Lake Blvd., Plymouth, MN 55441-3008**