



Ministry Training Institute

A missions and evangelism training ministry of

AFLBS

Association Free Lutheran Bible School

3134 East Medicine Lake Boulevard

Plymouth, MN 55441-3008

763.544.9501

Attach a recent photo of yourself here & enclose 1 additional photo.

Write name on back of photos.

_____ M
Last Name First Middle Former 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 Parents or Guardian Mailing Address Phone

Indicate Marital Status:

Single Married Do you have children? _____ Number & ages of children? _____ Have you been divorced? _____ If yes, give date
 Engaged Widowed Yes No Yes No

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

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?

_____ ()
What Church do you attend? Are you a member? how long regularly attended? Denomination and/or conference

_____ ()
Church Mailing Address: Number and Street City/State/Zip Pastor's Name

Educational

High School: _____ Dates attended: _____

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 training: _____ Dates Attended _____ Approx. Credits, Degrees or Diplomas

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? Yes No
Have you previously applied to AFLBS for admission? Yes No
Within the past year, have you used alcoholic beverages? Yes No
Within the past year, have you used tobacco? Yes No
Within the past year, have you used illegal drugs? Yes No
Have you been judged guilty of criminal or civil offenses? Yes No

Have you ever been charged with any crime involving sexual misconduct? Yes No
Have you ever been convicted of any crime involving sexual misconduct? Yes 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? Explain below:

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? _____ 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 \$2000 down (tuition* is \$2000/semester) before I begin the program. ____ *Tuition does not include room and board 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 raise up to \$3500 to finance my mission internship. _____
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Occupational Experience

Type of work you have some experience in _____

References

List below three persons who will complete recommendation forms for you. They should include your pastor, an employer, teacher, administrator or school counselor, and one or more friends who know you well (two years or more). Do not list relatives. **Give COMPLETE addresses. Without complete addresses, this application will not be processed.**

Name	Address	City	State	Zip Code
1. _____ Pastor				
2. _____ Employer				
3. _____ Teacher, Administrator, School Counselor or Friend				

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 _____

An 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