

Application For Admission RHEMA UNIVERSITY



37 N. Orange Ave. Room -500 Orlando FL 32801

Phone: 1-877-270-0349 Fax: 1-866-267-5128

**First time Students: Complete all information and also enclose the \$50 non-refundable application fee.
Rhema University does not receive cash and is not responsible for cash transactions.**

Please print in black in or type all information

Legal Name: Mr. Mrs. Miss _____ Male Female
Last First Middle

Birth Date: _____ Place of Birth: _____ Social Security No: _____

Mailing address: _____
Street City State ZIP

Email address: _____ Citizenship: USA Canada Other _____

Non-USA Citizen: Are you a permanent resident? Yes No If yes give Alien Number _____

Telephone number: Cell (_____) _____ Work (_____) _____

Current marital status: Single Married Spouse's full name: _____

ADMISSION INFORMATION

Certificate: Chaplaincy Program College Prep. (GED) Program
 Workers Certificate Certificate of Ministry Certificate of Theology

Undergraduate: Associates of Ministry Associates of Christian Counseling Associates of Theology
 Bachelor of Arts in Theology Bachelor of Arts in Christian Counseling
 Bachelor of Arts in Ministry Bachelor of Religious Arts in Elem. Education

Graduate: Masters of Theology Masters of Christian Counseling Masters of Ministry
 Doctor of Theology Doctor of Christian Counseling Doctor of Ministry

EDUCATION

Please list all Colleges, Bible Institutions, or Technical Schools you have attended. If you have attended more than two schools, submit additional information on a separate sheet of paper.

Name High School: _____ Date you graduated : ____ / ____ / ____

Mailing address: _____
Street City State ZIP

Name of School: _____ Date: ____ / ____ / ____ Degree received: _____

Mailing address: _____
Street City State ZIP

Name of School: _____ Date: ____ / ____ / ____ Degree received: _____

Mailing address: _____
Street City State ZIP

PERSONAL

Has any member of your family ever applied for admission or is currently a student at Rhema University?

Yes or No

If yes, give the name and relationship _____

Have you trusted Jesus Christ as your Savior? Yes No When? _____ Are you a member? Yes or No

Attending regularly? Yes No Denomination: _____ Pastor's Name _____

Name of Church: _____ Website: _____

If you wish to pay your application fee by credit card, please fill in the following information required to process your application. (Be sure to include credit card number, expiration date, and address information below).

Type of Card: Visa Master Card Discover

Card Number

Expiration Date:
Month Year

Cardholder's Address Information

Cardholder's P.O. Box
Or Street Number

Cardholder's Address Street Name

Cardholder's ZIP Code

I have read the Rhema University catalog or viewed website and agree to abide by the standards as set forth and I have told the truth to the best of my ability on this application. I further acknowledge that no other representations have been made to me in writing or orally other than what is stated in the Rhema University catalog. I further give Rhema University permission to order and review transcripts from educational institutions I have previously attended and at the discretion of the University, may request a Pastor's recommendation to assist the admissions counselors in their decision. I further permit Rhema University and its representatives to use photographs or videotapes that may include me for instructional or promotional purposes.

Applicant's signature: _____ Date: _____

BE SURE TO ENCLOSE YOUR APPLICATION FEE

For office use

Upon evaluation and review of _____ (student's name)
Earned and awarded credit hours, I am recommending that he/she be considered for an "AWARDED DEGREE" (Bachelor of Religious Arts in Ministry, Bachelor of Religious Arts in Christian Counseling, Bachelor of Religious Arts in Elem. Education, Master of Theology, Master of Ministry, Master of Christian Counseling, Doctor of Ministry, Doctor of Theology, Honorary Doctor).

(State recommended degree's name)

An applicant must have for "Awarded" Bachelor degree, a minimum of 120 credit hours. An applicant must have for an "Awarded" Master degree, a minimum of 30 credit hours beyond a Bachelor degree, with a minimum of 80% of the courses. An "Awarded" Doctorate degree requires a minimum of 30 credit hours above the Masters Degree.

(Print student's name as it should appear on degree) (student's social security)

student's street address or P.O. Box

city

state

zip code

Upon review of the information above, the recommended degree has been
ACCEPTED _____, or DENIED _____

Branch or Co-op Representative

Witness Signature

Rhema University Director

Witness Signature