## CSRA School of Supernatural Ministry 1st Year Application

VITAL INFORMATION					
First Name:	Middle Name:				
Last Name:					
Address:					
City:	State:				
Email Address:					
Phone Number:					
PERSONAL (circle one)					
Gender: Female	Male				
Marital Status: Single	Married Divorce	d Widowed			
If married, will your spouse	be attending school?	YES NO	•		
SPIRITUAL INFORMAT	TON				
When did you accept Christ	as your personal Sav	ior?			
Have you been baptized in t	the Holy Spirit accord	ing to Acts 1:8	and Acts 2:4 (Circ	cle one)?	
If yes, how do you know yo	u were baptized in the	e Spirit?			
Do you attend church regularly (circle one)? Are you a member (circle one)?		YES YES	NO NO		
How long have you been at	tending regularly there	e?			
Home Church:					
Church Phone:					
City:		_ State:	Zip Code	;	

Have you recently left another church (circle one)	? YES NO	
f yes, was it a good parting or is there unresolved	issues?	
State any Christian service you have done:		
FAMILY		
FAMILI		
Name of spouse, if married:		
Children (names and ages):		
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STATEMENT OF PURPOSE		
Give a brief description of your Christian experien	ace (how you came to know the Lord: you	r
		1
present walk with the Lord). Limit statement to 30	o words.	
MORE INFORMATION		
Briefly explain why you want to attend CSRA Sch	nool of Supernatural Ministry (Bethel DVI	D):
What are you really passionate about?		
mut are you rearry passionate about:		

Return Application with \$25.00 Registration Fee to:

Much More Ministries, 123 Springlakes Dr, Martinez, GA 30907