



KINGDOM LEADERS SEMINARY (KLS)



(SATELLITE OF RESTORATION THEOLOGICAL SEMINARY)

NEW STUDENT APPLICATION

Date of Application _____

Name of Applicant Please circle (Apostle, Dr., Pastor, Rev., Minister or Lay Person)

(Last) (Mr., Mrs., Ms.) (First) (MI)

PERMANENT ADDRESS

Street Address and or Apartment Number _____

City State Zip/Postal Code _____

County _____

Email Address _____

(____) _____ (____) _____ (____) _____
Home Number Work Number Cell Number

What is your hometown? City _____ State _____

Date of Birth _____ Male _____ Female _____

Last four numbers of Social Security _____

CHURCH AFFILIATION

Full name of denomination: _____

Local church _____ Location: City _____
State _____ Number of years active in this church _____ in ministry

Status in your denomination: Ordained Layperson

Licensed on _____ Ordained on _____

Pastor's Name: _____ (____) _____

Phone Number _____

IN CASE OF EMERGENCY

Contact Person _____ Relationship: _____

Home Number: _____

Degree Programs

- Associate Degree Bachelor's Degree Master Degree Doctorate Degree

I _____ hereby make application to **Kingdom Leaders Seminary** in obedience to God's call upon my life. I hereby declare I will fulfill His "Calling" upon my life, to complete all studies as directed by the Lord Jesus Christ and the representatives of **KLS**. My purpose is to enter the harvest fields as a laborer for the Gospel Ministry of Jesus Christ through the field of study that He has chosen for me.

The Degree Program of **KLS** promotes the synthesis of academic knowledge, biblical perspective with a Christian worldview in order that there might be a maturing of spirituality, intellectual, social and a physical value-driven behavior.

We encourage students to engage in a major field of study in career-focused disciplines built on a solid foundation and within our liberal arts courses they are designed to encourage students to become moral leaders who are seminary qualified to spread the Word of God throughout the nation and set a responsible Christian example through their lifestyle and vocation.

Certificates		<i>GED or High School diploma NOT Required for Certificates</i>
	----	<i>Biblical Studies</i>
	*	<i>Chaplaincy</i>
	*	<i>Christian Education</i>
	*	<i>Life Coaching</i>
		<i>Ministry</i>
		<i>Pastoral Ministry</i>
		GED or High School diploma Required for all degrees
Associate Degree	*	Christian Education
	----	Pastoral Care and Specialized Ministries GBOE Board Certified as Pastoral Counselor)
	*	Ministry
Bachelor Degree	*	Christian Education
		Pastoral Care and Specialized Ministries GBOE Board Certified as Pastoral Counselor)
		Ministry
Masters Degree		Divinity
	*	Pastoral Care and Specialized Ministries GBOE Board Certified as Pastoral Counselor)
		Pastoral Ministry
Doctorate Degree		Divinity
	*	Pastoral Care and Specialized Ministries GBOE Board Certified as Pastoral Counselor)
	----	Pastoral Ministry

VOCATIONAL & WORKING HISTORY:

Please list your vocational and working history beginning with your most recent first, then back in years

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

City State Zipcode

Date Began: _____ Date Ended: _____

PLEASE DESCRIBE POSITION & TYPE (S) OF WORK PERFORMED: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

City State Zipcode

Date Began: _____ Date Ended: _____

PLEASE DESCRIBE POSITION & TYPE (S) OF WORK PERFORMED: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

City State Zipcode

Date Began: _____ Date Ended: _____

PLEASE DESCRIBE POSITION & TYPE (S) OF WORK PERFORMED: _____

EDUCATION HISTORY: Please list your educational history, **starting first with your high school attendance**, then any vocational, college/university, Bible College/Seminary studies completed.

NAME OF SCHOOL CITY & STATE	YEARS ATTENDED (____-____)	DEGREE EARNED (Diploma, GED, AA, BA MA, Ph.D., Th.D)	AREA OF STUDY

SEMINARS & CEU HISTORY: Please list any seminars or Continuing Education Programs you may have attended starting with the most recent first, then going back . . . use additional paper if necessary.

NAME OF SEMINAR or TRAINING PROGRAM CITY & STATE	DATES ATTENDED (____-____)	CERTIFICATE EARNED	NUMBER OF C.E.U.'S EARNED

MILITARY HISTORY:

BRANCH OF SERVICE: _____ YEARS OF SERVICE: ____-____ TOTAL YEARS SERVED ____

COMMISSION UPON DISCHARGE: _____ STATUS OF DISCHARGE _____

POSITION & DUTIES (Military Occupational Specialty; MOS):

Office of Medical / Disability

Appropriate Academic accommodation requests must be made in writing at the beginning of each semester. Reasonable accommodations are a shared responsibility among the student. **RTS** has made a commitment to work with you.

Medical concerns:

I _____, hereby state that all of the information listed on this application is true and accurate as unto the Lord as my witness. I hereby grant permission to **Restoration Theological Seminary** to verify all of the information listed above. I further agree to and understand that any and all "Earned" Life Credit Hours, Educational Credit Hours, and Ministry Credit Hours based upon this application are granted at the discretion of RTS. I hereby agree and understand that I will complete all course requirements as unto the Lord Jesus Christ in the spirit of excellence, and I will comply with all Seminary Policies and Financial Commitments in pursuit of academic excellence in the Word of God.

I _____, hereby further understand that all of the courses and degrees of **RTS** are of an ecclesiastical nature and, whether granted or conferred, are in the restricted area of religion with the special purpose of preparing persons to work in the area of religion -whether Educational, Ministerial, or Counseling- and our courses depending upon your College or University of choice may be accepted with their academic guidelines however, our overall curriculum is NOT designed to be used in most general academic circles.

Application Reminders:

Check List ...

- Application fee of \$50.00 (Make payable to Restoration Theological Seminary)
- Bio
- Three Letters of Recommendation: ministerial, academic, business (30 days to submit to KLS)
- Endorsement from a spiritual leader in the Church / Denomination where you attend
- Official and complete transcript of all schools, college, university, and seminary records
- THIS Five page application read and filled out
- Signed and sent the following to the appropriate people

I _____, certify that the foregoing information is correct to the best of my knowledge. I understand that withholding information or giving false information constitutes *prima facie* (Latin meaning upon first sight) for denial of admission.

SIGNATURE OF APPLICANT

DATE

Return to: Office of Admission and Recruitment (**KLS, please forward to RTS Registrar's Office**)

It is the policy of **Kingdom Leaders Seminary (KLS)** not to discriminate on the basis of race, color, nationality, ethnic origin, sex, or disability in its admission policies, educational programs, and activities.

For Office Use Only Fee Received: Amt _____ Date _____

By _____

Revised Application 12-02-13