



## STUDENT APPLICATION

Please write clearly, or type. All blanks must be completed for this application to be processed.

### Please be sure the following is included:

- Attach 1 current (last 3 months) passport photo
- Enclose the **2,500** Shillings application fee (this is non-refundable)
- The reference form (ministerial referral) must be completed and attached in a sealed envelope or posted directly.
- Answer all questions. If a question does not apply, write "DNA" (Does Not Apply). Your application will not be processed and may be returned if any area is left blank.
- Be sure to sign all forms
- **All tuition is due in full before classes begin. (Tuition is non-refundable once classes have begun)**

Please print or type your full legal name (As it appears on your ID)

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NAME: (Title) (First Name) (Middle Name) (Surname)

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ADDRESS:

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(Country) Post Code

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Telephone # E-Mail

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Government ID# Sex Date of Birth: Age: Nationality:

F M

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Marital Status  Single  Married  Divorced  Widowed  Separated\*\* (give details)

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How many children do you have? Give their names and ages

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Are you Born-Again (saved) as understood in Romans 10:8-10  YES  NO How long?

Are you baptized in the Holy Spirit with the evidence of speaking in tongues as in Acts 2:2-4?  YES  NO

## A. CHURCH AFFILIATION AND REFERENCES

List the name of the church you currently attend, its address, minister's name and contact numbers.

List the name of your Pastor.

How long have you been attending this church?

Do you attend regularly?

What church activities have you been involved in?	How long?

IF YOU ARE NOT CURRENTLY INVOLVED WITH A CHURCH, PLEASE EXPLAIN WHY ON A SEPARATE PAGE whom were your referral forms given to? (NB: Write your name on the forms before giving them to your referees) Please write clearly the name and address:

Pastor/Church leader's Name:	Tel:	Email:
Personal Referee:	Tel:	Email:
Working Referee:	Tel:	Email:

## B. STATEMENT OF FAITH

Are you licensed?  Yes  No      Are you ordained?  Yes  No      If so, what Denomination/Organization?

YES  NO Do you believe the Bible is the inspired word of God and the only infallible guide in matters pertaining to conduct and doctrine?

YES  NO Do you believe in the Holy Trinity – that our God is one, but manifested in three persons: the Father, the Son and the Holy Spirit?

YES  NO Do you believe in the deity of the Lord Jesus Christ, that He is God made flesh and He is the only mediator between God and man?

YES  NO HAVING READ THE SPIRIT OF FAITH BIBLE TRAINING MINISTRIES' STATEMENT OF FAITH AND DO YOU AGREE WITH ITS CONTENT?

If NO, please explain (Use a separate page if needed)

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**C. HOW DID YOU HEAR ABOUT SPIRIT OF FAITH BIBLE TRAINING MINISTRIES?**

Source: \_\_\_\_\_

Who referred you?

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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**D. EDUCATIONAL HISTORY**

What is the highest level of education you've attained? (Circle one)

University (Years) 1 2 3 4 Masters Specialist Doctorate Other \_\_\_\_\_

Please list all college, university or other Bible Schools, Seminaries or other educational institutions you have attained.

NAME OF SCHOOL	DATES	MAJOR	DEGREE

Can you read, write and comprehend the English language?  YES  NO

Is English your first language? If not what is?  YES  NO

Have you ever been denied acceptance, expelled, dropped or suspended from school or college?  YES  NO If YES, BRIEFLY explain

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## E. WORK HISTORY

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Please list 2 work experiences beginning with PRESENT employer:

NAME OF EMPLOYER AND TEL.NO	DUTIES PERFORMED	DATES

IF YOU ARE CURRENTLY UNEMPLOYED, PLEASE GIVE AN EXPLANATION ON PAGE 3 INCLUDING HOW YOU WILL PROVIDE FOR YOUR TUITION FEES AND PERSONAL LIVING EXPENSES DURING CLASS. **SOFBTM WILL NOT BE RESPONSIBLE FOR ANY LIVING ARRANGEMENTS, MEALS, HOUSING OR TRANSPORTATION!!!**

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## F. ALCOHOL – TOBACCO- ILLEGAL DRUGS

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We feel that in order for a person to assume a leadership role in the Christian ministry, the highest standards of personal conduct are expected. This includes: abstinence from the use of illegal drugs, tobacco, alcohol or any sexual sins. We expect that each student will abide by this policy, while attending Spirit of Faith Bible Training Ministries. Anyone found in violation of any of these will be terminated from the school immediately and no monies will be refunded.

By ticking this box, you are stating that you are in agreement with this policy.

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## G. HEALTH CONCERNS

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If you have any disabilities that would require special facilities, please state what they would be:

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Person to be notified in case of emergency, (they must have a telephone).

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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## H. MEDICAL CONSENT

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I, the undersigned grant full and complete permission to SOFBTM, its employees or designates, or any related or consulting physician to render or give emergency medical aid, care, treatment, or assistance that could or would be deemed required or necessary. This consent I give freely and voluntarily, fully knowing and understanding all the above and its effect upon me.

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

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**I. PHOTO AND CONSENT**

I, the undersigned, grant full and complete permission to SOFBTM, its employees or any persons they choose to take, keep on file and use in publications my photo and or videos of me while involved on any SOFBTM associated event including both class and non-class times.

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

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**J. STATEMENT OF TRUTH**

I hereby state that all the information contained in this application is correct and true. If SOFBTM is notified that any of the information contained in the application is false, it will be grounds for immediate dismissal.

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

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**Be sure to review your application before posting. Incomplete applications will be returned to you for completion, thus taking longer to process. All blanks must be completed.**

**Please MAIL your completed application to:**  
**SPIRIT OF FAITH BIBLE TRAINING MINISTRIES**  
**P.O. BOX 19789-00202**  
**NAIROBI**  
**OR E-MAIL to: [spiritoffaithbtm@yahoo.com](mailto:spiritoffaithbtm@yahoo.com)**  
**Tel: +254 0707 731 632**

**GIVING DETAILS:**  
**PAYBILL: 247247**  
**ACCOUNT NUMBER: 0810260400694**  
**ACCOUNT NAME: SPIRIT OF FAITH BIBLE TRAINING MINISTRIES**

THIS APPLICATION AND THE RECOMMENDATION FORM BELOW MUST BE RETURNED NO LATER THAN JULY 1st



## **Spirit of Faith Bible Training Ministries**

### **Statement of Faith**

1. We believe that the Bible is the infallible, inerrant Word of God. No other book represents God's written revelation to mankind.
2. We believe in the Divine Trinity, that God is One, but is manifested in three Persons – Father, Son and Holy Spirit – all being co-equal and co-eternal.
3. We believe in the deity of the Lord Jesus Christ. He is fully God and Man.
4. We believe in the Person of the Holy Spirit. He is not cosmic force, but a Divine Personality.
5. We believe that salvation is the gift of God to man, separate from works and the Law and is made operative by grace through faith in Jesus Christ producing works acceptable to God.
6. We believe the term “born-again” or “new birth” refers to the New Testament experience of salvation and is the entry point for membership into the universal Church (the body of the Lord Jesus Christ).
7. We believe in water baptism by immersion as a direct commandment of the Lord Jesus and that this ordinance is for believers only as a symbol of the Christian's identification with Christ in His death, burial and resurrection.
8. We believe that the baptism in the Holy Spirit is a gift from God as promised by the Lord Jesus Christ to all believers in this dispensation and is received subsequent to the New Birth (salvation).
9. We believe that the Baptism of the Holy Spirit is accompanied by the initial evidence of speaking in other tongues as the Holy Spirit gives utterance.
10. We believe that healing is for the physical ills of the human body and is wrought by the power of God through the prayer of faith, and by the laying on of hands.
11. We believe that bodily healing is provided for in the atonement of Christ, and is the privilege of every member in the Church today.
12. We believe that the Lord Jesus Christ shall first return to earth for the Church (His Bride) and that His coming back is imminent (soon and very soon).
13. We also believe that following a period of Tribulation (7 years), Jesus shall later return to earth as the King of Kings and Lord of Lords and together with His saints (who shall be kings and priests), He shall reign for a thousand years.
14. We believe that those who physically die in their sins without accepting Jesus Christ as savior are hopeless and eternally lost in the Lake of Fire and they have no further opportunity of hearing the Gospel or repenting.
15. We believe that the Lake of Fire is literal and the terms “eternal” and “everlasting” (as used in describing the duration of the punishment of the damned in the Lake of Fire)



## MINISTER'S REFERRAL

To be completed by the applicant's Church Minister, Pastor, or Ministry Elder

### Instructions:

**To the Applicant:** Be sure to print/type your name in the 'Name of Applicant' line below. You should also provide your referee with an address and postage-paid envelope.

**To the Referee:** This evaluation is for the applicant named below who is applying for admission to Spirit of Faith Bible Training Ministries(SOFBTM). Serious consideration will be given to your comments. Please complete this form carefully. Since we request a candid evaluation, we will hold your comments in the strictest confidence. Therefore, we ask that this completed form be placed in the envelope provided by the applicant, sealed, and posted directly to the SPIRIT OF FAITH BIBLE TRAINING MINISTRIES – ADMISSIONS TEAM.

### Accountability Commitment:

Two of our key aims are to work with local church leaders and provide very practical training for our students. Both of these aims are fulfilled in part through the student's Practical Ministry Requirements (PMR). We require students attending SOFBTM to complete at least 100 hours of practical ministry service in *their* local church.

There are key ministry areas we want each student to gain experience in during their training, and these areas are all service-based (Usher, Administration, Cleaning Facilities, Greeting, Assisting the Pastor, setting up for meetings, etc.). You, or the person you designate as their PMR Mentor, will have the final say in what the student must do. The most important part of the PMR Mentor's job is completing a short activity report a few times throughout the year to ensure the student is fulfilling their duties in an efficient and helpful manner. *By recommending the student you are agreeing to be, or provide, a PMR Mentor for the student and assist the student in fulfilling their Practical Ministry Requirement.*

**Church Attendance Policy:** All students must maintain active participation in their local church, and they are NOT permitted to change churches while enrolled as a student of SOFBTM except under very special circumstances and only with their Pastor's full support.



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**Name of Applicant:**

(title) (first) (middle) (surname)

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**1. How long have you known the applicant?**

\_\_\_\_\_

**2. Describe your relationship:** • Very close • Close Casual Distant

**3. Please list what areas of involvement they have had in the church:**

\_\_\_\_\_

**4. Please evaluate his/her character by marking one of the following boxes:**

	Excellent	Good	Fair	Poor	Unknown
Honesty					
Dependability					
Cooperativeness					
Ability to work with others					
Moral character					
Personal appearance					
Consideration for others					
Acceptance of instruction					
Acceptance of discipline					

**5. How industrious is he/she as a student/worker?**

- Usually conscientious, hard worker Works harder than most students/workers
- Does about as much work as others Works less than most others
- Very lazy Have no

basis for judgment

**Please Comment:**

\_\_\_\_\_

**6. Describe the applicant's attitude toward you, your church, and church activities.**

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**7. From personal knowledge of the individual, would you?**

- Highly recommend him/her as a candidate for ministerial training.
- Recommend him/her as a candidate for ministerial training.
- Recommend him/her with slight reservations.
- Hesitate in recommending him/her for ministerial training.
- Unable to honestly recommend him/her as a candidate for ministerial training.

**(if you marked any of the last three, please explain below.)**

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**8. Emotional Evaluation:** • Very Stable • Stable • Unstable • Very Unstable

**9. Does the applicant respond well to authority?** • Yes • No

**10. The applicant's spiritual influence on others?** • Positive • Neutral • Negative

**11. Does the applicant associate with people of moral character?** Yes No

**12. Does the applicant have a good home life and/or marriage?** Yes No

**Please give short answers to the following questions**

**13. What do you consider to be the applicant's strong points?**

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**14. What do you consider the applicant's weak points?**

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**15. Is there any other information about the applicant that would help our evaluation?**

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**Please print your name and contact details:**

Name \_\_\_\_\_

Position in Ministry \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

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Tel. \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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**· Yes, I am happy to provide accountability for the applicant's Practical Ministry Requirements (PMR).**

**Thank you for your time and participation.**

**Please MAIL the completed form to:  
SPIRIT OF FAITH BIBLE TRAINING MINISTRIES  
P.O. BOX 19789-00202  
NAIROBI  
OR E-MAIL to: [spiritoffaithbtm@yahoo.com](mailto:spiritoffaithbtm@yahoo.com)**