



Regional

Christian University

Application for Admission

Desired Level:

☐ Diploma

☐ B.A.

Major:

☐ Biblical Studies

☐ Education

☐ Consejería Pastoral

☐ Missions/Evangelism

☐ Theology

Duration:

☐ Two Years

☐ Four Years

Date: _____ Email: _____ Start Date: _____

Name of Student: _____
(Last Name) (First Name) (Middle Name)

Address: _____
(Street) (City) (State, Country) (Zipcode)

Date of Birth: ____/____/____ (mm/dd/year) Place of Birth: _____ Age: _____

Gender: ☐ M ☐ F Marital Status: ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Re-Married

Special Abilities (athletic, Music, Art, Academics, etc.): _____

Name of Father: _____
(Last Name) (First Name) (Middle Name)

Address: _____
(Street) (City) (State, Country) (Zipcode)

Job _____ Place of Employment: _____

Telephone: () _____ Cellular: () _____ E-Mail: _____

Name of Church: _____ Denomination: _____ How often attends: _____

Name of Mother: _____
(Last Name) (First Name) (Middle Name)

Address: _____
(Street) (City) (State, Country) (Zipcode)

Job: _____ Place of Employment: _____

Telephone: () _____ Cellular: () _____ E-Mail: _____

Name of Church: _____ Denomination: _____ How often attends: _____

INFORMATION ON FAMILY

Both Parents Alive? Yes ____ No ____

☐ Married ☐ Separated ☐ Divorced ☐ Father Remarried ☐ Mother Remarried

With whom does the Student live? ☐ Both Parents ☐ Father ☐ Mother ☐ Guardian

Other (Please specify): _____

Married Students

Name of Spouse: _____
(Last Name) (First Name) (Middle Name)

Address (if different) _____
(Street) (City) (State, Country) (Zipcode)

Date of Birth: ____/____/____ (mm/dd/year) Place of Birth: _____ Age: _____

Information on children:

Name:	Age:	Date of birth:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

FINANCIAL INFORMATION

☐ Student will pay own expenses ☐ Student will work to pay expenses
☐ Student will pay with scholarship ☐ Student will apply for financial aid

EMERGENCY CONTACT

Contact person in case of communications or emergencies: ☐ Both Parents ☐ Father ☐ Mother

Other Person: _____ Telephone: _____

ACADEMIC INFORMATION

Applicant:

College: _____ Level/Credits _____

Address of
College: _____
(Street) (City) (State, Country) (Zipcode)

High School: _____ Average _____

Address of
High School: _____
(Location) (Dates)

Middle School: _____ Average _____

Address of
Middle School: _____
(Location) (Dates)

¿How did you hear of Regional Christian University?

Spouse:

College: _____ Level/Credits _____

Address of
College: _____
(Street) (City) (State, Country) (Zipcode)

High School : _____ Average _____

Address of
High School : _____
(Location) (Dates)

Middle School: _____ Average _____

Address of
Middle School: _____
(Location) (Dates)

WORK INFORMATION (Start with most recent job)

Applicant:

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done:

=====

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done:

=====

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done:

=====

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done:

=====

=====

WORK INFORMATION (Begin with most recent)

Spouse:

Place of Employment: _____ Job: _____
Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done: _____

=====

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done: _____

=====

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done: _____

=====

Place of Employment: _____ Job: _____

Dates of Employment: of _____ until _____ Reason for termination: _____

Address of
Employment: _____
(Street) (City) (State, Country) (Zipcode)

Responsibilities or work done: _____

=====

CONGREGATIONAL INFORMATION - Applicant (Start with most recent)

Applicant:

Name of Church: _____ Denomination: _____

Address of Church: _____
(Street) (City) (State, Country) (Zipcode)

Dates of membership or attendance: From _____ until _____ How often attends: _____

Reason for termination: _____ Job in the Church: _____

Responsibilities/ministry/work done:

Dates (period) of ministry or work:

Name of Pastor: _____ Telephone: _____

Address of Pastor: _____
(Street) (City) (State, Country) (Zipcode)

=====

Name of Church: _____ Denomination: _____

Address of Church: _____
(Street) (City) (State, Country) (Zipcode)

Dates of membership or attendance: From _____ until _____ How often attends: _____

Reason for termination: _____ Job en la Church: _____

Responsibilities/ministry/work done:

Dates (period) of ministry or work:

Name of Pastor: _____ Telephone: _____

Address of Pastor: _____
(Street) (City) (State, Country) (Zipcode)

=====

Name of Church: _____ Denomination: _____

Address of Church: _____
(Street) (City) (State, Country) (Zipcode)

Dates of membership or attendance: of _____ until _____ How often attends: _____

Reason for termination: _____ Job en la Church: _____

Responsibilities/ministry/work done:

Dates (period) of ministry or trabajo:

Name of Pastor: _____ Telephone: _____

Address of Pastor: _____
(Street) (City) (State, Country) (Zipcode)

CONGREGATIONAL INFORMATION Spouse (Start with most recent)

Spouse:

Name of Church: _____ Denomination: _____

Address of Church: _____
(Street) (City) (State, Country) (Zipcode)

Dates of membership or attendance: of _____ until _____ How often attends: _____

Reason for termination: _____ Job en la Church: _____

Responsibilities/ministry/work done:

Dates (period) of ministry or work:

Name of Pastor: _____ Telephone: _____

Address of Pastor: _____
(Street) (City) (State, Country) (Zipcode)

=====

Name of Church: _____ Denomination: _____

Address of Church: _____
(Street) (City) (State, Country) (Zipcode)

Dates of membership or attendance: of _____ until _____ How often attends: _____

Reason for termination: _____ Job in the Church: _____

Responsibilities/ministries/work done:

Dates (período) of ministry o trabajo:

Name of Pastor: _____ Telephone: _____

Address of Pastor: _____
(Street) (City) (State, Country) (Zipcode)

=====

Name of Church: _____ Denomination: _____

Address of Church: _____
(Street) (City) (State, Country) (Zipcode)

Dates of membership or attendance: of _____ until _____ How often attends: _____

Reason for termination: _____ Job in the Church: _____

Responsibilities/ministries/ work done:

Dates (period) of ministry or work:

Name of Pastor: _____ Telephone: _____

Address of Pastor: _____
(Street) (City) (State, Country) (Zipcode)

CIVIC INFORMATION

(Please be sincere: a past problem will not necessarily result in a rejection of your application to enter the College)

Applicant:

Do you know how to drive? _____ No. of license: _____

Date of marriage: _____ Previous marriages? _____

Other children: _____

Problems or federal charges (Drugs, Alcohol, Theft, Gangs, Problems with the Law, etc.)? Explain:

Problems or abuses of children/as (Accusations of physical abuse, sexual abuse of children)? Explain:

Marriage Problems (Separation, Unfaithfulness, Divorce, Marriage Abuse etc.)? Explain:

Moral Problems (Pornography, Incest, Homosexualism, Lesbianism, Sexual abuse of children)? Explain:

Spouse:

Do you know how to drive? _____ No. of license: _____

Date of marriage: _____ Previous marriages? _____

Other children: _____

Problems or federal charges (Drugs, Alcohol, Theft, Gangs, Problems with the Law, etc.)? Explain:

Problems or abuses of children/as (Accusations of physical abuse, sexual abuse of children)? Explain:

Marriage Problems (Separation, Unfaithfulness, Divorce, Marriage Abuse etc.)? Explain:

Moral Problems (Pornography, Incest, Homosexualism, Lesbianism, Sexual abuse of children)? Explain:

MEDICAL INFORMATION Applicant

Please explain any illnesses or handicaps or special needs that could affect you health, studies, or ministry.

Please make a list of medications you take on a regular basis:

Have you been evaluated for learning, attention, or vision disabilities? ☐ Yes ☐ No
If Yes, please explain the circumstances on a separate page and provide a copy of report.

MEDICAL INFORMATION Spouse

Please explain any illnesses or handicaps or special needs that could affect you health, studies, or ministry.

Please make a list of medications you take on a regular basis:

Have you been evaluated for learning, attention, or vision disabilities? ☐ Yes ☐ No
If Yes, please explain the circumstances on a separate page and provide a copy of report.

CONSENT

By signing this application, I authorize the school to investigate my academic, congregational, civil information, and obtain other necessary information in order to make a decision regarding admission. I have read the Declaration of Faith and the educational philosophy of Regional Christian University and give my consent to the rules and discipline of this educational institution.

Signature of Student: _____

Date: _____

Signature of Spouse:
(if Married) _____

Date: _____

...INFORMATION SUPPLEMENTARIA

The following information is needed in order to complete your admissions folder. This information may be turned in at a later date, but will be needed as early as possible in order to complete your admission to our College program. As a Student, you may take **classes for credit**, **classes not for credit**, or simply **audit classes**. Depending on your type of matriculation, you may or may not need to fill out all of the following requirements:

ESSAYS

Essay #1 – Personal Testimony of your Christian Faith (250 words)

Essay #2 – An explanation of your personal goals, and reasons for wanting to attend RBC (250 palabras)

Essay #3 – What is the ministry that God has for me, and why I believe so? (250 palabras)

TRANSCRIPTS AND GRADES

Transcript or other proof of having finished Middle and High School

College Entrance Exam Grades (ACT, SAT, Local Exam)

EVALUATIONS (Make copies of attached form and use for each of the following evaluations)

Evaluation #1 – Pastoral Evaluation (See attached form)

Evaluation #2 – Teacher Evaluation (See attached form)

Evaluation #3 – Friend Evaluation (See attached form)

MISCELLANEOUS

Digital Photograph of Applicant (sent by e-mail to djhoyte@rcuaflame.org)

Deadlines

May 1 (to start classes in June)

June 1 (to start classes in July)

July 1 (to start classes in August)

December 1 (to start classes in January)

Fees Assessed

Non-refundable \$25 Application Fee ~~ Technology Fee \$65 ~~ Registration fee of \$150 annually to enroll in the College program. ~~ Course Fees: \$75 per credit (\$225 per course)

Regional Christian University does not discriminate on the basis of race, color, national or ethnic origin, age, sex, disability, veteran, or military status. This policy applies to all student admissions, academic policies, scholarships, and other University-administered programs.

...SIGNATURE

By signing and submitting this application with the appropriate fee, you have started the process of acceptance into Regional Christian University. (Outstanding documents, materials, supporting papers, or grades will be added to your file as soon as they are submitted.)

Signature of Applicant

Date

**PLEASE RETURN TO: Admissions:
Regional Christian University
510 E. Van Week St. Edinburg, Texas
78541. Or: Scan and return to: djhoyte@rcuaflame.org
A non-refundable fee of \$25 must accompany this application.**

Regional Christian University

CHARACTER AND ACADEMIC PERFORMANCE EVALUATION

Excellent Good Average Satisfactory Unsatisfactory

PERSONAL ATTITUDES

Relationship with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obedience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finishes what he/she starts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a cooperative spirit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has purpose and goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean and organized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SOCIAL LIFE

Does not give in to peer pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has avoided drugs and gangs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
True Christian example in public Lives above reproach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FAMILY LIFE

Respectful of parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treats siblings well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unified family conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has family support for school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good manager of money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SPIRITUAL LIFE

Shows interest in spiritual matters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faithful participant in Church Humility and Submission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forgiving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willing to ask forgiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has strong Faith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACADEMICS

Arts and Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good study skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have known this student for _____ years.

Signature _____ Relationship _____ Date _____

Please use an extra sheet of paper to further explain any of the above points in greater detail.

***Please mail directly to the University: Admissions – Regional Christian University, 510 E. Van Week St. Edinburg TX 78541**