



CITY CHURCH



EMERGING LEADERS SCHOOL OF PURPOSE

STUDENT APPLICATION FORM

PLEASE FILL OUT THE FORM TO THE BEST OF YOUR ABILITY

DATE OF APPLICATION

/ /

PERSONAL INFORMATION

FULL NAME:

NICKNAME:

D.O.B. / /

EMAIL :

GENDER : MALE FEMALE

PLACE OF BIRTH :

NATIONALITY :

MARITAL STATUS :

ADDRESS

PRESENT ADDRESS :

CITY :

ZIP CODE :

STATE :

PHONE :

EDUCATION

HIGH SCHOOL OR GED:

COLLEGE OR TRADE:



CITY CHURCH



FREEDOM

EMERGING LEADERS SCHOOL OF PURPOSE

CURRENT AND/OR LAST 2 JOBS: (IF ANY)

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ARE YOU A PART OF A CHURCH? IF SO, WHERE DO YOU ATTEND?

REFERENCES

1.

2.

WHO REFERRED YOU TO APPLY FOR FREEDOM U?

WHAT DAYS/TIMES ARE YOU CURRENTLY AVAILABLE TO ATTEND CLASSES & OTHER SCHOOL REQUIREMENTS?

MONDAY:

TUESDAY:

WEDNESDAY:

THURSDAY:

FRIDAY:

IF NEEDED, ARE YOU WILLING TO ADJUST YOUR SCHEDULE TO ATTEND FREEDOM U CLASSES?



CITY CHURCH



FREEDOM

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WHO IS JESUS TO YOU?

PLEASE SHARE PART OF YOUR TESTIMONY:



CITY CHURCH



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WHAT DOES "PURPOSE" MEAN TO YOU & WHY IS IT IMPORTANT?

WHAT DO YOU THINK YOU WERE CREATED FOR?

WHAT ARE YOU PASSIONATE ABOUT?

WHAT ARE YOU GIFTED AT, AND/OR ENJOY DOING?

WHAT ARE YOUR DREAMS? WHAT MOTIVATES YOU?

WHAT WOULD YOU HOPE FOR IN A MENTOR?