

ECCLESIASTICAL APPLICATION INSTRUCTIONS

www.aenononline.org

Email: admissions@aenononline.org | 317 549 0255

Items Needed for Application Approval Process

- ⇒ 1. Completed Application Form
- ⇒ 2. Personal Statement Letter (see below)

Submit a 1–2 page typed statement answering:

- Why do you want to attend Aenon Bible College?
- How Aenon Bible College will help you fulfill your purpose.
- What is your vision for the ministry or service?
- How will this training support your calling?

- ⇒ 3. Recommendation letter (see below)

Submit letters of recommendation from:

- Minister Certification (Pastor)
- Ministerial License (Pastor and District Elder)
- Ministerial License applicants who are Pastors (District Elder and Suffragan Bishop)
- Ordination License (District Elder or Suffragan Bishop and Diocesan Bishop)
- Episcopal Formation (Diocesan Bishop and 2 Supporting Bishops)

- ⇒ 4. Photo Copy of Government ID
- ⇒ 5. Academic Transcripts or Certificates (if applicable)
- ⇒ 6. Recent Passport-size Photo
- ⇒ 7. Health Information (if applicable)
- ⇒ 8. \$35 Application Fee (Non-Refundable)

Application Fee may be paid by check or credit card. Checks should be made payable to "Aenon Bible College". Credit card may be used when applying on-line at www.aenononline.org. We do not accept cash payments.

AFTER YOU APPLY:

When the Admissions Office has received all required forms and the \$35 application fee, your application for admission will be reviewed. Upon completion of review, you will be notified by the Admissions Office as to the status of your application. Please allow up to 7 business days for processing and review of your application. For questions, please email admissions@aenononline.org.



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Please submit and mail to:

Licensure Admissions
Aenon Bible College
3939 Meadows Drive
Indianapolis, IN 46205

OR scan and email to:

admissions@aenononline.org

FOR AENON OFFICIAL USE ONLY

Date Rec'd _____

Fee Rec'd _____

Student ID# _____

Desired Start Term: ☐ Fall ☐ Spring ☐ Summer YEAR: _____

Study Mode: ☐ Online ☐ Aenon Approved Bible Institute: _____
Name of Institute

Program Applying For (check one)

☐ Lay Worker Certification

☐ Ministerial License

☐ Pastor's Leadership Academy

☐ Minister Certification

☐ Ordination License

☐ Episcopal Formation

PERSONAL INFORMATION

Your Name: _____
Last Name First Name MI

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____ Cell: (_____) _____

Email Address: (please print legibly) _____

Emergency Contact Name: _____

Relationship: _____ Phone: (_____) _____

Are you a U.S. Citizen? ___ Yes ___ No, If not Nationality/Citizenship: _____

Gender: ___ Male ___ Female Date of birth: (mm) _____ / (dd) _____ / (yyyy) _____

Marital Status: ___ Single ___ Married ___ Engaged ___ Divorced ___ Widowed/Widower

Last 4 Digits of Social Security #

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EDUCATIONAL BACKGROUND

Highest level of education completed: _____ Date of completion: _____

Starting after high school, list educational institutions attended:

School Name: _____ Dates: _____ Diploma/Degree Received: _____

School Name: _____ Dates: _____ Diploma/Degree Received: _____

School Name: _____ Dates: _____ Diploma/Degree Received: _____

School Name: _____ Dates: _____ Diploma/Degree Received: _____

Other Courses/Training Completed

Organization	Training	Certification	Year

HEALTH & MEDICAL INFORMATION

Do you have any medical conditions we should be aware of? ☐ Yes ☐ No

If yes, please explain: _____

Are you seeking an accommodation for a disability under the Americans with Disabilities Act (ADA) ☐ Yes ☐ No

If yes, provide documentation of disability with this Application

TUITION RESPONSIBILITY

Who will be responsible for your tuition and fees?

☐ Self ☐ Parent/Guardian ☐ Sponsor/Church/Council Other: _____

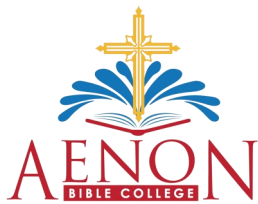
Name (if not self): Contact Information

Name: _____ Phone Number _____

Email Address _____ Position/Title _____

Will you be paying Tuition? ☐ Full ☐ By each cohort

Will you need a payment plan? ☐ Yes ☐ No



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CHURCH & MINISTRY INVOLVEMENT

Home Church: _____

Home Church Address:

Address: _____

City: _____ State: _____ Zip Code: _____

Present Position (check one):

- ☐ Minister
- ☐ Pastor
- ☐ Assistant Pastor
- ☐ District Elder
- ☐ Suffragan Bishop

Other _____

Pastor's Name (if applicable): _____

Pastor's Phone Number : _____

Pastor's Email Address: _____

Name of Local Council: _____

Are you currently involved in ministry on the local, state, or national level?

☐ Yes ☐ No

If yes, please describe your role, level (local, state, national), and years of experience:

Role/Position in Ministry	Level	Year



(Please attach documents below to this application)

1. PERSONAL STATEMENT

Please submit a 1–2 page typed statement answering:

- ⇒ Why do you want to attend Aenon Bible College?
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- ⇒ What is your vision for ministry or service?
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2. RECOMMENDATION

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DECLARATION & SIGNATURE

I certify that the information provided is accurate and complete. I understand that this application does not guarantee admission. I agree to abide by the spiritual, academic, and behavioral policies of Aenon Bible College if accepted.

Signature: _____

Date: _____