Ray of Hope International Inc.

## INTENSIVE DISCIPLESHIP TRAINING

## STUDENT REGISTRATION FORM

INC.	
REPORTS	
Reach Win Equip Send	ı

Last Name:	First Name:			Middle Initial:	
Address:	City: State:		State:	Zip Code:	
Ph. No:	Home Phone:	Ema	il:		
Date of Birth:	Gender:	Highest Grade:	O	ccupation:	
STUDENT BACKGROU	<u>ND</u>				
Year you accepted Christ:	Ye	ear you took Water Bap	tism:		
Areas of your interest:					
Have you ever attended any	kind of Bible training?	If yes, mention about i	it briefly:		
Are you currently or were in	the past involved in an	y church offices? If yes	s, explain abo	ut it briefly:	
Why did you choose to atten					
What do you think your calli					
What do you think your cam	ing in your inc is:				
W/I					
What is your vision?					
REGISTRATION					
Fee: \$100 (One Hundred D	ollars)only, however, ar	nyone willing to contrib	oute more are	most welcomed).	
Cash: Che	ck;(M	Take it payable to: Ray o	of Hope Inter	rnational Inc.)	

## **ACKNOWLEDGEMENT**

I do hereby accept and acknowledge that I read and understood every question in this form and filled them well and correctly.

I accept that the information provided with this application is all true and correct, I also accept that I have not withheld any information that would affect the outcome of this application.

I also accept and acknowledge that I will have to adhere and will be abided by the Policies/Rules and Regulations set forth by the Bible School, ROHI.

Name:	Signature:
Relationship:	Date:
Recommendation from the Local Church Pastor/ Leader:	
Pastor/ Leader's Name:	_Signature.:
Date:	