



*APPLICATION
CALVARY OF ALBUQUERQUE
4001 OSUNA RD, NE
ALBUQUERQUE, NM 87109*

Instructions:

1. Complete and return the following application in its entirety
2. Enclose \$25.00 (non-refundable) application fee
3. Have all three references completed and returned
4. All forms and references must be received no later than August 03, 2012
5. Enclose a passport sized photo of yourself
6. Double check all forms are signed and dated
7. Once all application components are received you will be contacted to schedule a personal interview with the director and administrator of the School of Ministry
8. Any reasonable accommodation that might be needed from the start of the application process please contact the SOM Administrator at (505) 344-4418
9. For any questions or additional information please call the SOM Administrator (505) 344-4418

FINANCIAL INFORMATION

Application Fee:	\$25.00 (Non-Refundable)
Tuition:	\$1,800.00 (\$1,400 for tuition plus an estimated \$400 for books)
Library Fee:	\$10.00 (One-time)

- The School of Ministry is a nine-month, two-semester program located on the Calvary of Albuquerque Campus. The school year begins in mid-August and ends the last week of May the following year. Class times run Monday through Friday 8:00am-11:30am. Church attendance and ministry participation are also required as part of the curriculum.
- Tuition includes: classes, books, fall & winter retreats, and special School of Ministry events.
- A minimum of 50% of the tuition is due upon registration August 9, 2012.
- The remaining tuition amount is due on or before November 1, 2012.

OFFICE USE ONLY: DATE _____

APPLICATION FEE: _____

COMMENTS: _____

INTRODUCTORY INFORMATION

Please print or type:

Name _____
Last First Middle

Mailing Address _____
Street/P.O. Box City/State Zip

Phone () _____ E-Mail _____

Age _____ Date of Birth _____ Sex _____ SS# _____

Marital Status _____ (If you or your spouse have been divorced, give explanation on a separate sheet of paper.)

Emergency contact: _____ Relationship _____

_____ () _____
City/State Phone E-mail

Place of Employment _____ Employer _____

Address _____

_____ () _____
City/State Zip Phone

Home Church _____ Pastor's Name _____

Address _____

_____ () _____
City/State Zip Phone

Length of Attendance _____

EDUCATIONAL HISTORY

High/Secondary School or equivalent from which you graduated or will be graduating:

Name _____ Location _____

Date of graduation _____ I have not completed high school

NOTE: Please provided unofficial transcripts.

College/University/Vocational/Seminary School attended:

Name _____

Address _____

Dates _____ Degree _____

Name _____

Address _____

Dates _____ Degree _____

Other: _____

NOTE: Please provide unofficial transcripts.

PERSONAL INFORMATION

On a separate sheet please answer the following:

- A. Give a one-page description on how you became a Christian. Please include your current walk with Jesus Christ.
- B. List any ministry or church involvement.
- C. Give reasons for attending SOM.
- D. List goals you desire to accomplish through SOM.
- E. List any gifts or callings that you are aware of.
- F. List any talents, abilities, or hobbies.
- G. If you have children, please give their name, age, and sex. Are there any disabilities?
- H. Please describe your job situation i.e. full-time/part-time, schedule, and your position. Is your employer aware of your upcoming school attendance?
- I. Are you in any financial debt? If so, please describe.

RELEASE OF LIABILITY

I/We do hereby release Calvary Chapel of Albuquerque Inc., its employees & agents from any liability whatsoever arising out of any injury, damage or loss, which may be sustained by, said person(s) during the course of involvement with Calvary Chapel or its School of Ministry.

Applicant's Signature _____ Date _____

Signature of parent or guardian required, if applicant is under the age of 18:

Signature _____ Date _____

Relationship _____

CONSENT FOR TREATMENT

In case of emergency, I/we hereby agree to the performance of such treatment, including anesthesia and surgery, as the attending doctor or physician may deem necessary.

Applicant's Signature _____ Date _____

Signature of parent or guardian required, if applicant is under age of 18:

Signature _____ Date _____

Relationship _____

NOTE: Read, Sign, and Return with application

CALVARY CHAPEL OF ALBUQUERQUE

Who We Are

Calvary of Albuquerque is a fellowship of believers who gather for the purpose of knowing and glorifying Jesus Christ. Over the years the growth that occurs inwardly as people submit themselves to God and are changed. Our great desire is to closely follow His direction and purpose for this fellowship. As the church is expanding, so is our vision expanding. So, we are a fellowship that is in constant process and development by God.

WHY WE EXIST

The purpose of Calvary Chapel is Three-fold:

Upreach: Believing that loving God is man's highest calling; our relationship to Him is our highest priority. All ministry flows out of this relationship, whether inreach {to God's people} or outreach {to the lost world}.

Inreach: Being members of a spiritual family, we seek to equip one another for service and to grow to spiritual maturity. Through large group meetings and small group interaction, we are trained, based on the Scriptures, which is God's handbook of life and means to that maturity.

Outreach: Our desire is to go out beyond the "Christian camp" into the world to expand the kingdom of God through evangelism. Jesus told us to "go into all the world" and we believe God has given every Christian a "sphere of influence" in which to make an impact for Christ.

WHAT WE BELIEVE

WE BELIEVE that there is one living and true GOD, eternally existing in three persons: The Father, The Son, and the Holy Spirit, equal in power and glory; this triune God created all, upholds all, and governs all.

WE BELIEVE that the SCRIPTURES of the Old and New Testaments are the word of God, fully inspired, without error in the original Manuscripts, and the infallible rule of faith and practice.

WE BELIEVE in GOD THE FATHER, an infinite, personal Spirit, perfect in Holiness, wisdom, power and love; that He concerns Himself mercifully in the affairs of men; that he hears and answers prayer; and that He saves from sin and death all who come to Him through faith in Jesus Christ

WE BELIEVE in JESUS CHRIST, God's only begotten Son, conceived by the Holy Spirit. We believe in His virgin birth, sinless life, miracles and teaching, His substitutionary atoning death, bodily resurrection, ascension into heaven, perpetual intercession for His people, and personal, visible return to earth.

WE BELIEVE in the HOLY SPIRIT, who came forth from the Father and Son to convict the world of sin, righteousness, and judgment; and to regenerate, sanctify and empower all that believe in Jesus Christ for

ministry. We believe that the Holy Spirit indwells every believer in Jesus Christ and that He is an abiding helper, teacher and guide. We believe in the present ministry of the Holy Spirit and in the exercise of all the Biblical gifts of the Holy Spirit

WE BELIEVE that all *PEOPLE* are sinners by nature and choice and, therefore, are under condemnation; that God regenerates by the Holy Spirit, those who repent of their sins and confess Jesus Christ as Lord. We believe that Jesus Christ baptizes the seeking believer with the Holy Spirit and empowers the believers for service, often subsequent to regeneration.

WE BELIEVE in the universal *CHURCH*, the living spiritual body, of which Christ is the head, and all regenerated persons are members.

WE BELIEVE that Jesus committed two *ORDINANCES* to the church:

1. Baptism
2. The Lord's Supper. We believe in baptism by immersion and communion open to all believers.

WE BELIEVE also in the *LAYING ON OF HANDS* for baptism of the Holy Spirit, for ordination of pastors, elders, and deacons, and receiving from the Holy Spirit through the believer the gift of healing.

WE BELIEVE in the personal, visible *RETURN OF CHRIST* to the earth and the establishing of His Kingdom, in the resurrection of the body, the final judgment and eternal blessing of the righteous, and the endless suffering of the wicked.

WE BELIEVE in what is termed *THE APOSTLES CREED* as embodying the fundamental facts of Christian faith.

WHERE DO YOU FIT IN?

First, *present yourself* to God (Romans 12-1) and see if God has planted you in this fellowship. If so, then discover your gifts and the calling of God in your own life.

Second, *study to show yourself approved* unto God (2 Timothy 2:15). As you grow in your relationship with God, let Him prepare you for effective service.

Third, *commit yourself* to the work of Jesus Christ in this fellowship. Get involved as a yielded vessel to do God's bidding anywhere He directs saying, as Isaiah, "*Here am I! Send me.*"

DISTINCTIVE PRACTICES OF CALVARY

Theologically, Calvary Chapels are Dispensational, Pre-Millennial and hold to a Pre-Tribulation Rapture.

The pulpit style of Calvary Chapels places the emphasis on expository through the Bible teaching.

Calvary Chapels believe and teach that all the spiritual gifts are available today but must be used “decently and in order” (1 Corinthians 12-14).

Regarding Soteriology and Ecclesiology, Calvary Chapels are neither Calvinistic nor Arminian but seek to find a middle ground between these two extreme systems.

Please choose one:

- I have read and agree with the enclosed doctrinal and practice statements from Calvary of Albuquerque.

- I have read and disagree with the enclosed doctrinal and practice statements from Calvary of Albuquerque. (Please explain any area of disagreement)

Print Name _____ Date_____

Signature _____

NOTE: Students are given access to various ministries, including those areas working with minors. Calvary Albuquerque requires a background check for all ministry leaders.

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize **Calvary of Albuquerque** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **Calvary of Albuquerque** or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release **Calvary of Albuquerque**, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____

PASTOR REFERENCE FORM
School of Ministry at Calvary of Albuquerque
4001 Osuna Rd. NE, Albuquerque, NM 87109, (505) 344-4418, Fax: 345-9140

APPLICANT INFORMATION: Please fill out the information below then submit this form to your Pastor.

Print Full Name _____

Address _____

City _____ State _____ Zip _____

Home phone (_____) _____ Work Phone (_____) _____

The Family Education Rights and Privacy Act of 1974 permits students the right to inspect their files. Because of the importance of preserving the confidentiality of a reference, the Act permits an applicant to waive his right of access to the reference. By signing below, the applicant willingly waives his right of access to see this recommendation, knowing that this waiver is NOT required as a condition for admission.

Signature _____ Date _____

PASTOR INFORMATION:

The above named applicant has applied for acceptance to the School of Ministry and has named you as a reference. Based upon the information we receive from you, will allow us to make a decision concerning their acceptance and how the school will contribute to the applicant's current spiritual growth. Therefore, we would appreciate it if you would complete the following form and mail it to us as soon as possible.

Print Full Name: _____

Church Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home/Cell phone: (_____) _____ Work phone: (_____) _____

Fax: (_____) _____ E-mail: _____

Signature: _____ Date: _____

1. How long have you known the applicant?

2. In what capacity do you know the applicant?

3. How long has the applicant been an active Christian?

4. Describe the evidence you see in the applicant's life of his or her commitment to follow Christ.

5. What gifts or ministries do you feel God has given the applicant?

Please rank the following 1-5 circling the number that you believe best describes the applicant.
1-unobserved 2-poor 3-average 4-good 5-excellent

Responsibility (Ability to faithfully assume & carry out duties or obligations)

1 2 3 4 5

Adaptability (Ability to adjust to changes in circumstances)

1 2 3 4 5

Promptness (Ability to perform readily or immediately)

1 2 3 4 5

Perseverance (Ability to move ahead in the face of adversity)

1 2 3 4 5

Decisiveness (Ability to synthesize information and make a decision)

1 2 3 4 5

Initiative (Ability to assess a task, start & follow through to completion)

1 2 3 4 5

Cooperation/Teamwork (Ability to work with other people)

1 2 3 4 5

Communication (Ability to present, evaluate, exchange thoughts with clarity and logic)

1 2 3 4 5

Spiritual Maturity (Demonstrates maturity & consistency in Christian faith)

1 2 3 4 5

Appropriate Behavior (Moral, ethical issues)

1 2 3 4 5

Emotional Stability (Response to stressful situations)

1 2 3 4 5

Personal Ministry (Active, positive influence on others for Christ)

1 2 3 4 5

Church Involvement (Relationship w/ local church)

1 2 3 4 5

Demonstrated Leadership (Concrete evidence to direct, conduct, guide or influence people)

1 2 3 4 5

Leadership Potential (Has abilities/skills necessary for development of leadership)

1 2 3 4 5

EMPLOYER/TEACHER REFERENCE FORM
School of Ministry at Calvary of Albuquerque
4001 Osuna Rd. NE, Albuquerque, NM 87109, (505) 344-4418, Fax: 345-9140

APPLICANT INFORMATION: Please fill out the information below then submit this form to your employer/teacher.

Print Full Name _____

Address _____

City _____ State _____ Zip _____

Home phone (_____) _____ Work Phone (_____) _____

The Family Education Rights and Privacy Act of 1974 permits students the right to inspect their files. Because of the importance of preserving the confidentiality of a reference, the Act permits an applicant to waive his right of access to the reference. By signing below, the applicant willingly waives his right of access to see this recommendation, knowing that this waiver is NOT required as a condition for admission.

Signature _____

Date _____

EMPLOYER/TEACHER INFORMATION:

The above named applicant has applied for acceptance to the School of Ministry and has named you as a reference. Based upon the information we receive from you, will allow us to make a decision concerning their acceptance and how the school will contribute to the applicant's current spiritual growth. Therefore, we would appreciate it if you would complete the following form and mail it to us as soon as possible.

Print Full Name: _____

Name of Company or School: _____

Address: _____

City: _____ State: _____ Zip: _____

Home/Cell phone: (_____) _____ Work phone: (_____) _____

Fax: (_____) _____ E-mail: _____

Signature: _____ Date: _____

1. How long have you known the applicant?

2. In what capacity do you know the applicant?

3. How long has the applicant been an active Christian?

4. Describe the evidence you see in the applicant's life of his or her commitment to follow Christ.

5. What gifts or ministries do you feel God has given the applicant?

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FRIEND REFERENCE FORM
School of Ministry at Calvary of Albuquerque
4001 Osuna Rd. NE, Albuquerque, NM 87109, (505) 344-4418, Fax: 345-9140

APPLICANT INFORMATION: Please fill out the information below then submit this form to your friend.

Print Full Name _____

Address _____

City _____ State _____ Zip _____

Home phone (_____) _____ Work Phone (_____) _____

The Family Education Rights and Privacy Act of 1974 permits students the right to inspect their files. Because of the importance of preserving the confidentiality of a reference, the Act permits an applicant to waive his right of access to the reference. By signing below, the applicant willingly waives his right of access to see this recommendation, knowing that this waiver is NOT required as a condition for admission.

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Signature: _____ Date: _____

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