

**BSSM-CHICAGOLAND
2ND YEAR APPLICATION**

General Information

Name:
Current Address:
City:
State:
Zip/Postal Code:
Email Address:
Home Phone Number:
Cell Phone Number:

Summer Contact Information

Will you be staying in Valparaiso during the summer? If yes,
Summer Address:
City:
State:
Zip/Postal Code:
Phone Number:

Finances

Is your first year school bill paid?

If not, how much do you still owe?

How do you plan to pay for your education?

Employment

Occupation:

Foreign Students

Are you a foreign student?

If yes, what visa are you planning to come with?

Present Employer:

School of Ministry Questions

What year did you graduate first year school of ministry?

Where did you complete first year school of ministry?

Were you absent less than 16 times during first year?

Have you attended church services every week during first year?

What outreach would you like to do in 2nd year? Is this the same outreach you did in 1st year?

Have you been sexually pure within the last school year?

Have you submitted your life decisions to leadership (i.e. ministry opportunities, marriage, etc.)?

In what areas do you feel you grew in during first year school of ministry?

In what areas do you still feel you need to grow?

Briefly explain why you want to attend Second Year School of Supernatural Ministry:

Experience

Have you drunk alcoholic beverages in the last six months?

If so, please explain:

Have you used tobacco in the last six months?

If so, please explain:

Have you used illegal drugs in the past twelve months?

If so, please explain:

Please mark each area you have participated in this school year:

Lifegroup:

Missions:

Church Service (greeter, bulletins, children's ministry, youth group, etc.)

Ministry Team:

Please mark each area you would like to participate in during 2nd year:

Class Photographer:

Lifegroup Host:

Lifegroup Leader:

Hospitality:

Prayer Coordinator:

Setup/Tear Down Coordinator:

Small Group Leader:

Sound Crew:

Testimony Recorder:

Worship Teams:

Ministry

Of the seven mountains of influence (Media, Government, Education, Economy, Celebration, Religion, and Family) where do you feel called to and why?

Recommendation

We would like the person that you have been accountable to during 1st year complete this recommendation.

Recommendations Full Name:

Email Address:

Address:

City:

State:

Zip/Postal Code:

Phone Number: