



# Grace & Truth Christian University

## STUDENT APPLICATION

Date: \_\_\_\_\_

**IMPORTANT:** Please PRINT or TYPE. ANSWER ALL QUESTIONS. Applications will not be processed nor academic standing assessed unless all questions are answered and the application signed and dated by the applicant. Do not leave any question blank; use N/A to indicate an item that does not apply.

### 1. PERSONAL INFORMATION

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Rev. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.		Last Name	First Name	MI	<input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> _____	Maiden Name, If Applicable
Mailing Address			City	State/Province	Zip Code	
Country		Home Phone (area code) Number		Work Phone (area code) Number		
Birthdate (mm/dd/yyyy)	Place of Birth	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Widowed	Race <input type="checkbox"/> African American <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Jewish <input type="checkbox"/> Native Amer. <input type="checkbox"/> Other		
Social Security Number			Email Address	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, what Country? _____		
Church Background/Denomination		Church Presently Attending		Pastor's Name		
Person to Notify in Case of Emergency		Relationship		(area code) Phone Number		

### 2. MINISTRY EXPERIENCE

Current Ministry Status, If Any	<input type="checkbox"/> Senior Pastor	<input type="checkbox"/> Missionary	<input type="checkbox"/> Music Minister	<input type="checkbox"/> Chaplain	<input type="checkbox"/> Church/Ministry Administrator
	<input type="checkbox"/> Assist. Pastor	<input type="checkbox"/> Evangelist	<input type="checkbox"/> Children's Minister	<input type="checkbox"/> Lay Minister	<input type="checkbox"/> _____
	<input type="checkbox"/> Youth Minister	<input type="checkbox"/> Itinerant Teacher	<input type="checkbox"/> Administrator/Trustee	<input type="checkbox"/> N/A	
Are You Currently Licensed or Ordained? <input type="checkbox"/> N/A <input type="checkbox"/> Licensed <input type="checkbox"/> Ordained	Credentialing Organization		Past Ministry Involvements <input type="checkbox"/> Pastoral <input type="checkbox"/> Evangelism <input type="checkbox"/> Teacher <input type="checkbox"/> Radio/TV <input type="checkbox"/> _____	Number of Years in Ministry	

### 3. EDUCATIONAL INFORMATION

Have You Previously Attended Grace and Truth University? <input type="checkbox"/> Yes <input type="checkbox"/> No				
High School Name* Location (City, State)	Start Date (mm/yyyy)	End Date (mm/yyyy)	Study Emphasis	Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> Diploma <input type="checkbox"/> No <input type="checkbox"/> G.E.D.
School Name** Location (City, State)	Start Date (mm/yyyy)	End Date (mm/yyyy)	Major	Diploma/Degree Earned

ALL EDUCATIONAL BACKGROUND MUST BE SUPPORTED BY THE FOLLOWING DOCUMENTATION:  
 \* If you have not attended college: Send a photocopy of your high school transcript, diploma or G.E.D.  
 \*\* List schools including bible Institutes, Bible Colleges, and other colleges and universities. Must have original, sealed, official transcripts sent directly to your campus.

#### 4. SALVATION TESTIMONY

Please State Your Salvation Testimony

#### 5. EDUCATIONAL AND MINISTRY GOALS

Briefly State Your Educational and Ministry Goals

## NON-DISCRIMINATION POLICY

Grace and Truth Christian University does not discriminate on the basis of nationality, ethnic origin, age, or gender. WE guarantee the rights and privileges, and the availability of programs and activities to all students of the University.

## PRIVACY RIGHTS OF STUDENTS

Statute 20, United States Code, §1232g and regulations adopted pursuant thereto, hereinafter referred to as the Code, requires that each student be notified of the right accorded him or her by the Code. The following is provided as basic general information relative to the Code:

The Code provides for an institution to establish a category of student information termed "directory information." When available in college records, any information falling in the category of "directory information" will be available to all persons on request (i.e., the IRS, FBI, or other government agencies, and for use in GTCU publications). GTCU has identified the following student data as "directory information:"

- |                      |                               |   |
|----------------------|-------------------------------|---|
| 1. Name              | 5. Date and Place of Birth    | 9. Dates of Attendance                                    |
| 2. Address           | 6. Major Field of Study       | 10. Degrees and Awards Received                           |
| 3. Telephone Listing | 7. Church Membership          | 11. Most Recent Previous Educational Institution Attended |
| 4. Race              | 8. Denominational Affiliation |   |

All other information, such as health and medical records, disciplinary records, records of personal counseling, required student and family financial income records, transcripts or student permanent academic records, student placement records and other personally identifiable information shall be open for inspection only to the student and such members of the professional staff for the college as have responsibility for working with the student. Such information will not be released to send parties without consent of the student.

Except as required for use by the president in the discharge of his or her official responsibilities as prescribed by laws, regulations of the state board, and board policies, the designated custodian of such records may release information from these records to others only upon authorization in writing from the student or upon a subpoena by a court of competent jurisdiction.

## PLEASE READ CAREFULLY THE FOLLOWING AFFIDAVIT FO AGREEMENT BEFORE SIGNING.

1. I certify that I have truthfully and accurately answered all questions contained in this application. I understand that falsification of any kind is grounds for refusal of my application or expulsion should falsehood be discovered after acceptance to the University.
2. I indicate by my signature that I have been notified of my rights as recorded by Statute 20, United States Code, §1232g.
3. I certify by my signature that I agree to abide by the policies of this institution as described in the Grace and Truth Christian University Student Handbook and Course Catalog.

---

Applicant Signature

---

Date