

Legal Name _____
Last/Family/Sur (Enter name **exactly** as it appears on official documents.) First/Given Middle (complete) Female/Male.

Preferred name, if not first name (only one) _____ Former last name(s) _____

Birth Date _____ US Social Security Number, if any _____
mm/dd/yyyy Required for US Citizens and Permanent Residents applying for financial aid via FAFSA

Preferred Telephone _ Home _ Cell Home (_____) _____ Cell (_____) _____
Area/Country/City Code Area/Country/City Code

E-mail Address _____

Permanent home address _____
Number & Street Apartment #

City/Town _____ County or Parish _____ State/Province _____ Country _____ ZIP/Postal Code _____

If different from above, please give your current mailing address for all admission correspondence. (from _____ to _____)
(mm/dd/yyyy) (mm/dd/yyyy)

Current mailing address _____
Number & Street Apartment #

City/Town _____ County or Parish _____ State/Province _____ Country _____ ZIP/Postal Code _____

If your current mailing address is a boarding school, include name of school here: _____

Church Affiliation

Your answers to these questions will not affect your admittance into Kingdom Truth University. If you are not affiliated with a church please put "N/A".

Church Name _____ Denomination _____

Church Address _____ Pastor _____

Youth Leader _____ How long have you attended this church: _____

DEMOGRAPHICS

Citizenship Status _____

Non-US Citizenship(s) _____

Birthplace _____
City/Town State/Province Country

Years lived in the US? _____ Years lived outside the US? _____

Language Proficiency (Check all that apply.)
S(Speak) R(Read) W(Write) F(First Language) H(Spoken at Home)

_____ S R W F H

Marital Status: Please check the box that best describes your marital status.

<input type="checkbox"/> Single	<input type="checkbox"/> Separated
<input type="checkbox"/> Married	<input type="checkbox"/> Widowed
<input type="checkbox"/> Divorced	<input type="checkbox"/> Widower

1. Are you Hispanic/Latino?
 Yes, Hispanic or Latino (including Spain) _ No If yes, please describe your background.

2. Regardless of your answer to the prior question, please indicate how you identify yourself. (Check one or more and describe your background.)
 _ American Indian or Alaska Native (including all Original Peoples of the Americas)

Are you Enrolled? _ Yes _ No If yes, please enter Tribal Enrollment Number _____

Asian (including Indian subcontinent and Philippines)

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original Peoples)

White (including Middle Eastern)

FAMILY

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. Many colleges collect this information for demographic purposes even if you are an adult or an emancipated minor. If you are a minor with a legal guardian (an individual or government entity), then please list that information below as well. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you, in the Additional Information section.

Household

Parents' marital status (relative to each other): Never Married Married Civil Union/Domestic Partners Widowed Separated Divorced (date _____) mm/yyyy

With whom do you make your permanent home? Parent 1 Parent 2 Both Legal Guardian Ward of the Court/State Other

If you have children, how many? _____

Parent 1

Mother Father Unknown

Is Parent 1 living? Yes No (Date Deceased _____) mm/yyyy

Last/Family/Sur First/Given Middle

Former last name(s) _____

Country of birth _____

Home address **if different** from yours

Preferred Telephone: Home Cell Work (_____) _____
Area/Country/City Code

E-mail _____

Occupation _____

Employer _____

College (if any) _____ CEEB _____

Degree _____ Year _____

Graduate School (if any) _____ CEEB _____

Degree _____ Year _____

Legal Guardian (if other than a parent)

Relationship to you _____

Last/Family/Sur First/Given Middle

Country of birth _____

Home address **if different** from yours

Preferred Telephone: Home Cell Work (_____) _____
Area/Country/City Code

E-mail _____

Occupation _____

Employer _____

College (if any) _____ CEEB _____

Degree _____ Year _____

Graduate School (if any) _____ CEEB _____

Degree _____ Year _____

Parent 2

Mother Father Unknown

Is Parent 2 living? Yes No (Date Deceased _____) mm/yyyy

Last/Family/Sur First/Given Middle

Former last name(s) _____

Country of birth _____

Home address **if different** from yours

Preferred Telephone: Home Cell Work (_____) _____
Area/Country/City Code

E-mail _____

Occupation _____

Employer _____

College (if any) _____ CEEB _____

Degree _____ Year _____

Graduate School (if any) _____ CEEB _____

Degree _____ Year _____

Siblings

Please give names and ages of your brothers or sisters. If they are enrolled in grades K-12 (or international equivalent), list their grade levels. If they have attended or are currently attending college, give the names of the undergraduate institution, degree earned, and approximate dates of attendance. If more than three siblings, please list them in the Additional Information section.

Name Age & Grade Relationship

College Attended _____ CEEB _____

Degree earned _____ Dates _____
mm/yyyy – mm/yyyy

Name Age & Grade Relationship

College Attended _____ CEEB _____

Degree earned _____ Dates _____
mm/yyyy – mm/yyyy

Name Age & Grade Relationship

College Attended _____ CEEB _____

Degree earned _____ Dates _____
mm/yyyy – mm/yyyy

EDUCATION

Secondary Schools

Most recent secondary school attended _____
 Entry Date _____ Graduation Date _____ School Type: Public Charter Independent Religious Home School

Address _____ CEEB/ACT Code _____
mm/yyyy mm/dd/yyyy
Number & Street

City/Town _____ State/Province _____ Country _____ ZIP/Postal Code _____
 Counselor's Name _____ Counselor's Title _____

E-mail _____ Telephone (_____) _____ Fax (_____) _____
Area/Country/City Code Number Ext. Area/Country/City Code Number

List all other secondary schools you have attended since 9th grade, including academic summer schools or enrichment programs hosted on a secondary school campus:
 School Name & CEEB/ACT Code _____ Location (City, State/Province, ZIP/Postal Code, Country) _____ Dates Attended (mm/yyyy) _____

Please list any community program/organization that has provided free assistance with your application process: _____

If your education was or will be interrupted, please indicate so here and provide details in the Additional Information section: _____

Colleges & Universities List all college/university affiliated courses you have taken since 9th grade and mark all that apply: taught on college campus (CO); taught on high school campus, excluding AP/IB (HS); taught online (ON); college credit awarded (CR); transcript available (TR); degree candidate (DC).

College/University Name & CEEB/ACT Code	Location (City, State/Province, ZIP/Postal Code, Country)	CO	HS	ON	CR	TR	DC	Dates Attended <small>mm/yyyy – mm/yyyy</small>	Degree Earned

If you indicated that a transcript is available, please have an official copy sent to your colleges as soon as possible.

ACADEMICS

The self-reported information in this section is not intended to take the place of your official records. Please note the requirements of each institution to which you are applying and arrange for official transcripts and score reports to be sent from your secondary school and the appropriate testing agencies. Where "Best Scores" are requested, please report the highest individual scores you have earned so far, even if those scores are from different test dates.

Grades Class Rank _____ Class Size _____ Weighted? Yes No GPA _____ Scale _____ Weighted? Yes No
(if available) (if available)

ACT Exam Dates: _____ Best Scores: _____
(past & future) mm/yyyy mm/yyyy mm/yyyy (so far)
COMP mm/yyyy English mm/yyyy Math mm/yyyy
Reading mm/yyyy Science mm/yyyy Writing mm/yyyy

SAT Exam Dates: _____ Best Scores: _____
(past & future) mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy (so far)
Critical Reading mm/dd/yyyy Math mm/dd/yyyy Writing mm/dd/yyyy

TOEFL/IELTS Exam Dates: _____ Best Score: _____
(past & future) mm/yyyy mm/yyyy mm/yyyy (so far)
Test Score mm/yyyy

AP/IB/SAT Subjects Best Scores: _____

(per subject, so far)	mm/yyyy	Type & Subject	Score	mm/yyyy	Type & Subject	Score

Current Courses Please list all courses you are taking this year and indicate level and credit value. Indicate quarter classes taken in the same semester on the appropriate semester line.

Full Year/First Semester/First Trimester	Second Semester/Second Trimester	Third Trimester <small>or additional first/second term courses if more space is needed</small>

EXTRACURRICULAR ACTIVITIES & WORK EXPERIENCE

Extracurricular Please list your **principal** extracurricular, volunteer, and work activities **in their order of importance to you**. Feel free to group your activities and paid work experience separately if you prefer. Use the space available to provide details of your activities and accomplishments (specific events, varsity letter, musical instrument, employer, etc.). **To allow us to focus on the highlights of your activities, please complete this section even if you plan to attach a résumé.**

Grade level or post-graduate (PG)					Approximate time spent		When did you participate in the activity?		Positions held, honors won, letters earned, or employer	If applicable, do you plan to participate in college?
9	10	11	12	PG	Hours per week	Weeks per year	School year	Summer/School Break		
-----					_____	_____	-	-	_____	-
Activity _____										
-----					_____	_____	-	-	_____	-
Activity _____										
-----					_____	_____	-	-	_____	-
Activity _____										
-----					_____	_____	-	-	_____	-
Activity _____										
-----					_____	_____	-	-	_____	-
Activity _____										
-----					_____	_____	-	-	_____	-
Activity _____										
-----					_____	_____	-	-	_____	-
Activity _____										

Programs of Study

<u>Biblical Theological Studies Track</u>	<u>Educational Theology Track</u>
<p>Associate Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Associate of Arts in Religion <input type="checkbox"/> Associate of Arts in Ministry <p>Bachelor Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Bachelor of Divinity <input type="checkbox"/> Bachelor of Arts in Ministry <input type="checkbox"/> Bachelor of Theological Studies <p>Master Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Master of Arts in Religion (concentration in Bible) <input type="checkbox"/> Master of Theological Studies <input type="checkbox"/> Master of Ministry <p>Doctorate Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Doctor of Ministry <input type="checkbox"/> Doctor of Theological Studies <input type="checkbox"/> Doctor of Philosophy in Religion 	<p>Associate Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Associate of Art in Christian Counseling <input type="checkbox"/> Associate of Arts in Religion <p>Bachelor Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Bachelor of Art Degree in Christian Counseling <input type="checkbox"/> Bachelor of Art Religion <p>Master Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Master of Art in Christian Counseling <input type="checkbox"/> Master of Art in Religion <p>Doctorate Degrees offered:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Doctor of Philosophy in Christian Counseling <input type="checkbox"/> Doctor of Philosophy in Religion

Expected Start/Course Load/Classification

<p>Semester you wish to enroll:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fall _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Winter _____ <p style="text-align: center;">(Year)</p>	<p>Course Load:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time 	<p>Incoming Classification:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Freshman <input type="checkbox"/> Transfer <input type="checkbox"/> Re-Enrollee <input type="checkbox"/> Other _____
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Cost of Attendance

U.S Citizen Applicants: There is a non-refundable application fee of \$50. Undergraduate courses are \$50 per credit hour. Graduate courses are \$75 per credit hour. A COURSE CONSIST OF 2-3 credit hours depending on the gravity of the subject. Diplomas are a flat fee of \$600 per year, and are completed within a 10 month program.

Example of Credit Hour: 2 undergraduate courses with 3 credit hours = 6X \$50

Total = \$300

3 Courses with 3 credit hours = 9 x \$50

Total = \$450

International Applicants: There is a non-refundable application fee of \$100. Undergraduate courses for international students are \$150 per credit hour. Graduate courses are \$225 per credit hour. A COURSE CONSIST OF 2-3 credit hours depending on the gravity of the subject. Diplomas are a flat fee of \$600 per year, and are completed within a 10 month program.

Example of Credit Hour: 2 undergraduate course with 3 credit hours = 6X \$150

Total = \$900

3 Courses with 3 credit hours = 9 x \$150

Total = \$1350

Note: A payment plan of five (5) payments in five weeks can be arranged. All payments must be made before the beginning of each class period. To ensure continuous stay, all financial obligations must be met per schedule.

Funding your education

How do you plan to pay for your education? (If choosing more than one, please number in order of importance.)

_____ One-time payment

_____ Payment plan

_____ Student loan

_____ Other: _____

Personal Information

Do you have any physical handicaps or health conditions which require special attentions? () Yes () No - If yes, please explain.

Do you have any allergies to drugs, food, or environment? () Yes () No -If yes, please explain below.

Are you currently taking any medications? () Yes () No -If yes, please explain below.

Have you accepted Jesus Christ as your personal Savior? () Yes () No -If yes, please explain below.

Describe your present spiritual life:

Additional Information: Please attach a separate sheet if you wish to provide details of circumstances or qualifications not reflected in the application.

Disciplinary History

Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from the institution. _ Yes _ No

Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? _ Yes _ No

[Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered "yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

Note: Applicants are expected to immediately notify the institutions to which they are applying should there be any changes to the information requested in this application, including disciplinary history.

SIGNATURE

Application Fee Payment: How will you be paying it? (Please mark one)

____ Online Payment ____ Will Mail Payment ____ In-person Payment

Required Signature

I certify that all information submitted in the admission process—including the application, the personal essay, any supplements, and any other supporting materials—is my own work, factually true, and honestly presented, and that these documents will become the property of the institutions to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree, should the information I have certified be false.

I acknowledge that I have reviewed the application instructions for each college receiving this application. I understand that all offers of admission are conditional, pending receipt of final transcripts showing work comparable in quality to that upon which the offer was based, as well as honorable dismissal from the school.

I affirm that I will send an enrollment deposit (or equivalent) to only one institution; sending multiple deposits (or equivalent) may result in the withdrawal of my admission offers from all institutions. [Note: Students may send an enrollment deposit (or equivalent) to a second institution where they have been admitted from the waitlist, provided that they inform the first institution that they will no longer be enrolling.]

Signature _____ Date _____

mm/dd/yyyy

Kingdom Truth University institution admission offices do not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation.