**Application for Admission**

Reformation International College (RIC)

Other Titles

[ ]  Mr. [ ]  Rev.

[ ]  Miss [ ]  Dr.

[ ]  Mrs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Other \_\_\_\_\_\_\_\_

 (last) (first) (middle)

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Delivery Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip/Post Code: \_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ Business Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_

E-Mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Of what country are you a citizen? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Single [ ]  Married [ ]  Separated [ ]  Divorced [ ]  Remarried

Number of children: \_\_\_\_\_\_\_ Ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **EDUCATIONAL GOALS:**

Do you plan to graduate from Reformation International College? [ ]  Yes [ ]  No

 **IF YES**

 [ ]  BA in Ed. [ ]  B.A. Certificate (Can be used as credits for BA in Ed.)

 Taking individual courses [ ]  for credit OR [ ]  with assistance but not for credit.

**II. ECCLESIASTICAL INFORMATION:**

**Name of Church**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Denominational Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Province/State: \_\_\_\_\_\_\_\_\_\_\_ Zip/Post Code: \_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_ Pastor’s Email: \_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pastor’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: (\_\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_

Are you a communicant member? [ ]  Yes [ ]  No How often do you attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years attended \_\_\_\_\_\_\_\_\_

**III. EDUCATIONAL HISTORY:**

Please provide a detailed chronological list of your educational history from high school to the present. If high school is your last completed education, please send a copy of your diploma. If undergraduate or graduate college/university work is your last completed education, please send the transcripts for your courses (whether having received a degree or not). This is what item VI. 3 refers to.

**IV. PERSONAL REFERENCES** (not from family members)

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/State: \_\_\_\_\_\_\_\_\_\_\_ Zip/Post Code: \_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/State: \_\_\_\_\_\_\_\_\_\_\_ Zip/Post Code: \_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If English is not your first language, have you taken the TOEFL? [ ]  Yes Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  No

**V. ELECTRONIC MEANS OF STUDY AND COMMUNICATION:**

*(RIC communicates with its students primarily via the internet. Some exceptions are made, but each needs to be evaluated on an individual basis))*

1. Do you have a computer? [ ]  Yes [ ]  No If no, will you have regular access to a computer near you to use. [ ]  Yes [ ]  No

 If no, how do you intend to:

1. Do your course-work and submit your courses? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Communicate with the school and professors electronically. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. A. Will the computer you use be able to read the following kinds of files:

 1) Microsoft Word 2003 or later .doc or equivalent files.

 2) Adobe or other .pdf files

 B. Will the computer you use be able to send and received attached M.S. Word .doc files? [ ]  Yes [ ]  No
 If no, what do you intend to use?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VI. The following information must be received by RIC before your application is complete.**

1. [ ]  This application appropriately filled out (and picture if at all possible).

2. [ ]  If applying for a bachelor’s degree, please supply a copy of your high-school diploma or G. E. D. (General Education Diploma.).

3. [ ]  One or more Proctor Application forms completed and signed by the person(s) willing to proctor your exams, and

accompanied by a letter written on letterhead of the institution with which the proctor is affiliated, verifying his affiliation with it. (Computer-generated stationery is not acceptable.)

4. [ ]  A U.S. dollar check (from a U.S. bank) or money order to include application fee of $100.00.

5. [ ]  A completed Study Hours Estimation Form.

**VII. Please read and sign the following:**

I certify that:

1. All of the information I have provided to Reformation International College is accurate and truthful.
2. I agree to abide by the regulations of Reformation International College as set forth in its catalog and understand that they may change without notice from time to time.
3. I am in agreement with the policies and standards of Reformation International College and am willing to uphold them and live by them if I am accepted as a student at Reformation International College.
4. I acknowledge that no other representations have been made to me in writing, electronically, or orally other than what is stated in the Reformation International College catalog.
5. I will do all my own work and will not share my work with other students.
6. I will not make copies of any recorded or written materials supplied by Reformation International College without written approval from Reformation International College Administration.
7. I understand that if it is ever discovered that I have violated this agreement, I may be expelled from Reformation International College, all courses given may be counted as failures, any degrees that have been granted by the seminary may be revoked, and there will be no refunds of any monies paid or owed to the seminary. There is no time limit to these penalties.

Having fully understood this and freely agreed to it, I have placed my signature and the date below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Student Signature Date

**Please send this information or post to:**

Reformation International College

Attn: Registrar

13950 – 122nd St.

Fellsmere, FL 32948-6411 U.S.A.

Telephone: (772) 663-8844

Facsimile: (772) 571-8010

E-mail: registrar@reformation.edu