Reformation International College [RIC]

**Bachelor Certificate Application for Admission**

**[NOTE: Double-click on each line and then type your information/responses; mark “X” by Yes/No]**

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

(last) (first) (middle)

Address: Street: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** City: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

Home Phone: ( **\_\_\_\_** ) **\_\_\_\_\_\_** - **\_\_\_\_\_\_\_\_\_** Cell Phone: ( **\_\_\_\_\_\_** ) **\_\_\_\_\_\_** - **\_\_\_\_\_\_\_\_\_**

Fax: ( **\_\_\_\_\_** ) **\_\_\_\_\_\_** - **\_\_\_\_\_\_\_\_\_\_\_**

E-Mail address (required): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**\_\_\_** Single **\_\_\_** Married **\_\_\_** Separated **\_\_\_** Divorced **\_\_\_** Remarried

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

**EDUCATIONAL GOALS:**

Do you plan to graduate from Reformation International College? **\_\_\_** Yes **\_\_\_** No

**IF YES**  **IF NO**

DEGREE: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_** Taking courses for credit for the following program: **\_\_\_\_\_\_\_\_\_**

MAJOR: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_** Bachelor Certificate in Theology

**\_\_\_** Other: **\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ECCLESIASTICAL INFORMATION:**

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

Street: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

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

**Pastor’s Email**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Are you a member? **\_\_\_** Yes **\_\_\_** No

If YES: **\_\_\_** Professing Member; **\_\_\_** Baptized only; **\_\_\_** Not Baptized

How often do you attend? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Years attended **\_\_\_\_\_\_\_\_\_**

Ordained/Licensed? **\_\_\_** Yes **\_\_\_** No If yes, in what capacity and when? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Still current? **\_\_\_\_\_\_\_\_**

Have you ever been under church/ecclesiastical discipline? **\_\_\_** Yes **\_\_\_** No If yes, explain (on separate paper).

**PROCTOR INFORMATION:**

(**NOTE**: Every student requires a proctor for the writing of exams; and a proctor application needs to be submitted)

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

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

Proctor Email: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Proctor Phone: ( **\_\_\_\_\_\_** ) **\_\_\_\_\_\_\_** - **\_\_\_\_\_\_\_\_\_\_\_\_**

**Checklist for information to Reformation International College** (see email address below).

1. **\_\_\_** This application appropriately filled out.

2. **\_\_\_** Transcripts of any high school and/or college level work completed.

*Transcripts not required for Certificate applicants, but is required for receiving a transcript or applying credits to degree.*

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

4. **\_\_\_** Online payment of the application fee of $100.00 (or agreed upon price) by mail or online at gorcm.org

**Please read and sign the following:**

I certify that:

1. All of the information I have provided to Reformation International College (RIC) is accurate and truthful.
2. I am in agreement with the policies and standards of RIC and am willing to uphold them and live by them if I am accepted as a student.
3. 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.
4. I will do all my own work and will not share my work with other students.
5. I will not make copies of any recorded or written materials supplied by Reformation International College without written approval from Reformation International College Administration.
6. 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 may be revoked, and there will be no refunds of any monies paid or owed to the college. 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 (By typing name I understand I am officially signing)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date

**Please email (or scan and email) this information to:**

E-mail: [registrar@reformation.edu](mailto:registrar@reformation.edu)

Reformation International College

Attn: Registrar

1300 University Blvd.

Melbourne, FL 32901 U.S.A.

Telephone: (772) 663-8844