

# CHRISTIAN LIFE COLLEGE

9023 West Lane, Stockton, CA 95210  
(209) 476-7840 www.clc.edu

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## International Student Application Checklist

Please  
place  
your  
picture  
here.

1. Complete and return this application. Answer all questions.
2. A \$30.00 (US Funds) application fee must accompany this application.
3. **A letter of recommendation from a United Pentecostal Church missionary must accompany this application. Canadians are exempt.**
4. Include a recent photograph of yourself.
4. Have a physician complete a "Health Certification" form and send it to the college.
5. Request that your high school and all post-high school institutions (Trade, Business, College, University, or Bible College) send transcripts of your grades to Christian Life College.
6. Furnish scores for the TOEFL exam.
7. Upon receipt of your application, the college will send *Reference Forms* to those individuals you have indicated on your application.
8. **ALL** paperwork must be in our office before we can process your application and notify you of your acceptance. You may call us at any time and we will be happy to inform you of the progress of your application.
9. Paperwork needed to apply for a Student Visa will be sent along with your acceptance letter.
10. You must bring proof of medical insurance coverage with you. Major medical insurance is available here. You must make your own arrangement.
11. Application deadline for fall enrollment is July 31. Spring enrollment is November 30

***Filling out this form does not obligate you in any way, nor does it imply your acceptance as a student. Answer each question carefully, avoiding indefinite statements. All information will be regarded as confidential and will be kept in our own private files. You will be notified by mail of action taken upon your application.***

*Special arrangements for late enrollment must be made with the Director of Student Recruitment before registering.*

**Personal Data****Please print**

Name: \_\_\_\_\_  
 Last First Middle Phone Number

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

\_\_\_\_\_ State Country Zip Code

\_\_\_\_\_ Birth Date (Month/Day/Year) Age e-mail—optional

**Country of Birth:** \_\_\_\_\_ **Country of Citizenship:** \_\_\_\_\_

Race: Hispanic White Black Asian Other

Status: Single Engaged Married Divorced\* Separated\*

*\*Send a letter of explanation with your application.*

**I am applying for the**Fall SemesterSpring Semester

Degree: Associate of Arts Bachelor of Arts No Degree

Major: Christian Music Bible & Theology Christian Education  
General Ministry Missiology Christian Media

**Parents and Emergency Information**

Father: \_\_\_\_\_  
 Last First Phone Number

Mother: \_\_\_\_\_  
 Last First Phone Number

Address: \_\_\_\_\_  
 Street City State Zip Country

Status: Single Married Divorced Separated

Church: \_\_\_\_\_  
 Name of church where your parents are members How long attended?

**Where should emergency calls or correspondence be directed?**

Name: \_\_\_\_\_  
 Last First Relationship

Address: \_\_\_\_\_  
 Street Phone Number

Address: \_\_\_\_\_  
 City State Zip Code

## Church Data

Pastor \_\_\_\_\_  
Last First Phone Number

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

\_\_\_\_\_ State Country Zip Code

Church \_\_\_\_\_  
Name of church where you pastor

## Missionary Information

Missionary \_\_\_\_\_  
Last First Phone Number

Address: \_\_\_\_\_  
Street, plus apartment # City

\_\_\_\_\_ State Country Zip Code

## References

Give names of two adults—other than the pastor, missionary, or relatives.

1. Name: \_\_\_\_\_  
Last First Phone Number

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

\_\_\_\_\_ State Country Zip Code

2. Name: \_\_\_\_\_  
Last First Phone Number

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

\_\_\_\_\_ State Country Zip Code

## Education

### Name and Address of High School

Major Year Graduated Honors Received

### Name and address of College

Major Year Graduated Honors Received

## Other Data

- Yes No Do you have or have you ever had any significant physical or learning impairment?
- Yes No Have you ever been treated for any nervous, mental, or emotional disorder?
- Yes No Have you ever seen a psychologist or a professional counselor?\*
- Yes No Have you ever used illegal or dangerous drugs?
- Yes No Were you ever expelled, dropped, or suspended by any school or college?\*
- Yes No Are you now, or have you ever been, under the supervision of a parole officer or court?\*
- Yes No Have you ever been arrested for any reason other than a minor traffic violation?\*

- *\*If any answer is affirmative, please give complete details on a separate sheet of paper.*

### Please answer the following questions completely.

1. Have you been baptized in Jesus' Name? \_\_\_\_\_ Date \_\_\_\_\_
2. Have you received the Holy Ghost as in Acts 2:4? \_\_\_\_\_ Date \_\_\_\_\_
3. Have you backslidden since then? \_\_\_\_\_ If so, when were you reclaimed? \_\_\_\_\_
4. To what type of ministry do you feel called? \_\_\_\_\_  
Is it your plan to enter the fulltime ministry? \_\_\_\_\_
5. Are you in debt? \_\_\_\_\_ If so, how much? \_\_\_\_\_
6. **How do you plan to finance your first year? Pay in Full? \_\_\_\_\_ Weekly Payments? \_\_\_\_\_**  
**(NOTE: If making weekly payments, an initial down payment will be required.)**
7. Will anyone be dependent upon you for support during the school year? \_\_\_\_\_
8. **Are you covered by health insurance? YES NO You must provide proof of coverage.**
9. Who or what influenced you to apply for admission to Christian Life College?  
Pastor      Friend      Correspondence      Field Representative  
Alumni      Internet      Conference      Other
10. List and describe any church activities and/or leadership in which you have been involved (Youth Ministry, Sunday School, Choir, etc. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. List any instruments you play. \_\_\_\_\_
11. **On a separate piece of paper, express in your own words why you would like to attend Christian Life College. (Approximately 300-500 words)**

