Deeper Life

**School of Evangelism**

 ***(A subsidiary of Caribbean Deeper Christian Life Ministry)***

**Clip Recent Passport Photograph**

 **P.0. Box 11, Kingston 3.Tel: 923-1040; 391-5191; E-mail:** **deeperlifejamiaica@vahoo.com**

**PERSONAL DATA**

**REGISTRATION FORM**

1. Full Name:

(Male or Female)

*2.* Date of Birth:

Telephone # (h) (cell)

3. Marital Status: (Married, Divorced, Separated, Single, Engaged)

4. Residential Address:

5. Postal Address (if different from above)

5. E-mail Address

6. Place of work:

Type of Work: \_ \_

7. Contact person in case of emergency: Name:

8. Contact person’s telephone number:

9. Your highest education level (Primary, Secondary or Tertiary)

10. Can you read and write English? (Rate yourself: Good, Fair, a Little)

**CHURCH AFFILIATION**

11. Name of your Church:

12. Address of your Church:

13. Present place of worship (if different from #10)

14. What functions do you play in your Church?

15. What is your Church brethren's opinion of you?

**SPIRITUAL EXPERIENCE AND KNOWLEDGE**

16. When did you become a Born-Again Christian (if possible with date and place)?

17. Write and attach short report of how you became a born-again Christian.

18. In a sentence: What does it mean to be a 'Born-Again Christian?

19. Explain in a sentence your understanding of these Christian experiences: a. Salvation: b. Sanctification:

c. Holy Spirit Baptism:

**THE CHALLENGE**

20. How did you know about Deeper Life School of Evangelism?

21. Why do you want to attend School of Evangelism?

22. What are your expectations at the end of the course? What will you become?

23. Underline your major area of interest in Evangelism?

*Personal Evangelism Mass Evangelism Youth Evangelism Children Evangelism Hospital Evangelism Prison Evangelism Home/Foreign Evangelism Church Planting Any other:*

24. Choose and Underline the most preferable day you will attend classes: *(Class is once per week). Special permission will be given to those doing shift work to attend any class according to their duties.*

**KINGSTON**

*Wednesday - 9 00am - 1.00pm*

*Wednesday - 5.00pm - 9.00pm*

*Saturday - 9 .00am - 1 .00pm*

25. Do you promise to attend classes punctually? Attend required

Seminars/Camp Retreat and participate in Practicum? (Yes/No)

26. Do you accept to pay the required school fees according to chosen payment plan? (Please note that this fee does not include the cost of Seminars/Retreats/Books/Handouts/Graduation, etc.)These cannot be determined until their circumstances are established. (Yes/No)

26. Who will pay for your course? (Church) (Spouse) (Parent) (Myself)

27. Do you promise to abide by the rules of this school? Respect all other students and staff; be an example of Christian behaviour (lTim.4:12)? Do you accept that your unsatisfactory behaviour will lead to expulsion from the school? (Yes/No)

Student's Signature:

Date: Registration #

Registrar's Name:

Receipt #

Amount Paid:

APPLICATION APPROVED/UNAPPROVED BY PRINCIPAL/DIRECTOR: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*