

# MIAMI CHRISTIAN UNIVERSITY APPLICATION FOR ADMISSION

TO APPLICANT: Please complete ALL items of this application by printing or typing, and forward to the Admissions Department of MIAMI CHRISTIAN UNIVERSITY. If an item is no applicable, enter NA. If any space is insufficient use additional pages.

NAME \_\_\_\_\_

DATE \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

\_\_\_\_\_

## PERSONAL AND BIOGRAPHICAL INFORMATION

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Birthplace \_\_\_\_\_

Sex\_\_ Citizenship \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_

SS# \_\_\_\_\_

Single\_\_ Engaged\_\_ Married\_\_ Separated\_\_ Divorced\_\_

**If engaged, explain plans for future and fiance(e)'s present and/or future relationship to MIAMI CHRISTIAN UNIVERSITY. If married, explain status of family while you are in school. If separated or divorced, give details.**

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Name of spouse \_\_\_\_\_ Date of marriage \_\_\_\_\_

Name, age, sex of children \_\_\_\_\_

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Name/Address of Parents (if unmarried) \_\_\_\_\_

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Name/Address/Telephone of an emergency contact \_\_\_\_\_

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If under 25 and single, are your parents serving as full time ministers and missionaries?

Minister? \_\_\_\_\_ Missionary? \_\_\_\_\_

Name of church/organization \_\_\_\_\_

Name/address of your church \_\_\_\_\_

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Your Pastor's Name/Address \_\_\_\_\_

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Do you feel a call or burden for a specific line of Christian service? \_\_\_\_\_

Explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are your vocational plans upon completion of your training and education? \_\_\_\_\_

\_\_\_\_\_

When were you converted? \_\_\_\_\_ When did you receive the Baptism in the Holy Spirit? \_\_\_\_\_

### **GENERAL INFORMATION**

Type of Christian work in which you have been most active:

\_\_\_\_\_

High school/college extracurricular activities \_\_\_\_\_

\_\_\_\_\_

Hobbies, Interests \_\_\_\_\_

Musical Interests \_\_\_\_\_

Are you a minister? \_\_\_\_\_ Ordained \_\_\_\_\_ Licensed \_\_\_\_\_ Other \_\_\_\_\_

Credentialed by \_\_\_\_\_

Have you ever been expelled by any school?\_\_\_\_\_ If yes, explain

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**EDUCATIONAL INFORMATION**

LIST ALL SENIOR HIGH SCHOOLS AND HIGHER INSTITUTIONS ATTENDED

Name of School – Address – Years Attended – Graduation date

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If you do not have a high school diploma, do you have a high school equivalency diploma (GED)?\_\_\_\_\_

Issued by

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HEALTH: Good\_\_\_ Average\_\_\_ Poor\_\_\_ Do you have a physical disability or activity limitation? Yes\_\_\_ No\_\_\_ If yes, please explain: \_\_\_\_\_

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Are you under a doctor's care?\_\_\_\_\_ If yes, please explain:

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**EMPLOYMENT INFORMATION**

Present employer/address \_\_\_\_\_

\_\_\_\_\_  
(street city state zip)

Type of work \_\_\_\_\_

How long? \_\_\_\_\_

Past employment (Last 5 years)

**Name of Employer/City / Type of Work / Duration**

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**MILITARY SERVICE INFORMATION**

Active? \_\_\_\_\_ Veteran? \_\_\_\_\_ Branch of Service \_\_\_\_\_

Dates of Service \_\_\_\_\_ Highest Rank \_\_\_\_\_

Type of Discharge \_\_\_\_\_ If other than honorable,  
explain: \_\_\_\_\_

\_\_\_\_\_

**PERSONAL STATEMENT**

State here the reason you desire to attend the Miami Christian  
University and what you want to be accomplished by this training  
and education \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

REFERENCES: List the name, complete address, and telephone number of three (3) persons (not relatives), including your Pastor, who have known you for at least one year. Each of these should be asked to complete a reference letter and return it directly to the Registrar's Office, Miami Christian University, 9775 S.W. 87 Ave., Miami, FL 33176.

Pastor \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**FINANCIAL RESPONSIBILITY**

**FINANCIAL ARRANGEMENTS: There will be a registration fee of \$50.00 payable online at the time of Application. The course fee of \$90.00 per credit hour will be due and payable online upon enrollment in each class.**

**SPACE FOR FUTHER COMMENTS**

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



IF ACCEPTED, I AGREE TO ABIDE BY THE RULES AND REGULATIONS OF MIAMI CHRISTIAN UNIVERSITY

\_\_\_\_\_

Date of application

\_\_\_\_\_

Signature of Applicant

**NOTE:**

APPLICATIONS WILL BE PROCESSED BY THE REGISTRAR, BUT FINAL APPROVAL WILL BE CONTINGENT UPON RECEIPT OF REFERENCES.

TRANSCRIPT INFORMATION WILL BE REQUESTED WHEN TRANSFERRING TO MCU FROM ANOTHER INSTITUTION.

High School Transcripts or Proof of G.E.D. will be required BEFORE student file is complete. (Contact the Registrar's Office if you are interested in completing your high school education via the Internet.)