



Agape International Ministries Bible Training Institute Application Form

(Please include \$50.00 application fee)

Mailing Address:
Agape International
Ministries
P.O. Box 1152
McDonough, GA 30253

Personal Information

Last Name:		First Name:		Middle Initial:	
Address:			City:		
State:		Zip:			
Home Phone:		Cell Phone:			
Date of Birth:			Age:		Sex:
Marital Status:	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed				
Educational Background (Highest Level Attained):	<input type="checkbox"/> 12 years <input type="checkbox"/> 14 years <input type="checkbox"/> 16 years <input type="checkbox"/> 18 years				
Degree(s):					
Last School Attended (Name):					
City:			State:		

Church Information

Date of Salvation:		Date of Water Baptism:	
Membership Classes Completion Date:			
Have you received the Baptism of the Holy Spirit?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Holy Spirit Baptism (evidenced by speaking with other tongues):
Current Church Membership:			Pastor's Name:
Church Phone:			
Church Email:			
Are you aware of the area(s) of ministry that God has called you to?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes", please explain.			
Give a brief description of your church background:			

Statement of Commitment

I, _____, realize that as a member of Agape International Ministries Bible Training Institute, I have a responsibility to God and the members of the local body. I understand my commitment to regularly attend church services, serve my local church/ community, and maintain a consistently Godly lifestyle that reflects holiness according to II Corinthians 7:1 and II Peter 3:11. I commit to be a faithful and consistent blessing to this ministry and the Kingdom of God.

Signature: _____ Date: _____
(Student)

Signature: _____ Date: _____
(Dean of Bible Training Institute)

Signature: _____ Date: _____
(Pastor Lucius McDowell)