



Kingdom T.E.A. Leadership School

APPLICATION

TYPE OR PRINT ALL ITEMS

When do you plan to attend? Fall Spring Summer Year 20_____

Name _____

Present Address _____

City _____ State _____ Zip _____

Country _____

Phone (____) _____

Permanent Address _____

City _____ State _____ Zip _____

Country _____

Phone (____) _____

PERSONAL

Gender: Male Female

Marital Status: Single Married Separated Divorced Widowed

Have you previously attended KTEA? Yes No If yes, last term attended: _____

Date graduated from high school/GED _____

Birth Date ____/____/____ Age _____

Social Security Number _____ - _____ - _____

Birthplace: City: _____ State/province or country: _____

Are you a citizen of the U.S.? Yes No

If no, country of citizenship: _____

Are you a resident alien? Yes No

If yes, please include a copy of U.S. government authorization (green card or other)

SPIRITUAL

When did you accept Christ as your personal Savior? ____/____

Have you had an Acts 2:4 experience? _ Yes _ No

Do you attend church regularly? _ Yes _ No

Are you a member? _ Yes _ No

State any type of Christian service you have done:

Home church/denomination

Pastor's name _____

Phone (_____) _____

Address of church _____

FAMILY

Spouse: If married, name of spouse _____

Birth date ____/____/____ Age _____

Occupation _____

Children: (please answer the following for children living with you):

Name _____ Birth date _____ _M _F

Name _____ Birth date _____ _M _F

Name _____ Birth date _____ _M _F

Name _____ Birth date _____ _M _F

EDUCATION

High school _____ Dates attended _____

Did you graduate? _ Yes _ No

College _____ Dates attended _____

Course of study/degree conferred _____

Other _____ Dates attended _____

Course of study/degree conferred _____

EMPLOYMENT EXPERIENCE

Present employer: _____

Past employer: _____

Address of employer: _____

Address of employer: _____

Dates (from/to): _____

Dates (from/to): _____

Duties performed: _____

Duties performed: _____

HISTORY

Have you used or are you currently using illegal drugs? Yes No

If yes, date of last use? _____

If yes, explain: _____

Have you ever been involved in homosexuality/lesbianism? Yes No

How long since involved? _____

Do you currently smoke? Yes No

Do you currently drink alcoholic beverages? Yes No

If in the past, give date last used: Tobacco _____ Alcohol _____

Have you ever been arrested? Yes No

If yes, when ____/____/____ If yes, attach brief explanation.

Were you convicted? Yes No If yes, attach brief explanation.

HEALTH

Please describe physical or emotional conditions, and state any special attention or treatment required.

Has your education/employment been disrupted for any period of time because of a physical problem or nervous disorder? Yes No

FINANCES

Have you included your \$50 application fee? Yes No

Are you a veteran? Yes No Are you eligible for benefits? Yes No

How do you plan to pay for your education? _____

HOUSING

Will you need housing? Yes No

Please return this form to:

New Freedom Church

KTEA Leadership School

P.O. Box 119

Webb, AL 36376



Kingdom T.E.A. *Leadership School*

Fall Course Announcement 2007

Courses for Fall 2007

- Old Testament Survey
- Principles of Biblical Counseling

Class Schedule

- Tuesday 6:00 pm - 8:30 pm
- Wednesday 6:00 pm - 8:30 pm
- Special Events TBA

Dates

9/11/2007 thru 12/11/2007