

Church Of God In Christ Academy
North Carolina Third Ecclesiastical Jurisdiction

Application for Admission

| Section I - A complete Application Package includes: |
|---|
| a. A one-time \$50 non-refundable processing fee b. A photograph of applicant (for example, driver’s license photo, selfie, etc.) c. A letter of recommendation from the applicant’s pastor for any candidate who is seeking ordination or licensure. d. Official Transcript from last school attended. e. Transfer Students – an Official Transcript from previous Academy or Religious Training Institution |

| Section II – Applicant Information | | | |
|--|-------------------------------------|---|--|
| Name <i>(Please print legibly your name as it should appear on your credentials)</i> | | | |
| Last | First | Middle | Suffix (Jr., Sr., II) |
| Address <i>(Physical Address, no P.O. Boxes)</i> | | | |
| | | | |
| City | State | Zip Code | |
| Telephone Home <i>(circle preferred contact number)</i> | | Telephone Mobile <i>(circle preferred contact number)</i> | Date of Birth <i>(Month/Year)</i> |
| Email Address | | Marital Status | |
| | | <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widow | |
| Highest Educational Level (circle one) | | Year Graduated | Post Graduate Studies |
| <input type="checkbox"/> HS/GED <input type="checkbox"/> AA <input type="checkbox"/> BA/BS <input type="checkbox"/> Master’s Degree <input type="checkbox"/> PhD | | | |
| Bible School or Seminary Training (List name & years of attendance) | | | |
| | | | |
| Church Name | | Pastor’s Name | Year Joined |
| | | | |
| District Name | | District Superintendent’s Name | |
| | | | |
| Purpose for attending the Academy: | | Current Ministry Title/License (if any) | |
| <input type="checkbox"/> Ordination | <input type="checkbox"/> Missionary | <input type="checkbox"/> Other | |
| Special Needs – please specify all needs and/or disabilities that require special accommodations or consideration. | | | |
| | | | |
| | | | |
| | | | |

Transfer Students

Name of Previous Academy/Institution

Registrars' Name

Registrar's Telephone Number

Registrar's Email Address

Section III: Essay

Please submit a 500-word essay, describing your current ministry activities and stating why you want to attend NC Third COGIC Academy. Your essay should be typed using Times New Roman, 12 pt. font, and double spaced.

Section IV: Payment Instructions:

Upon submission of the application and processing fee, applicants will receive an invoice for tuition from the COGIC Academy Financial Department. Instructions for online payment will be noted on the invoice. Tuition is due upon receipt of the invoice, and in no event shall tuition be paid later than the first day of class for the particular semester. Late registration will incur a \$25 late fee.

Applicant Acknowledgment

By my signature below, I certify the information I provided on and in connection with this application is true and correct to the best of my knowledge.

Date:

Signature:

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS SECTION

| Required Documents & Fees | | Date Received |
|--------------------------------------|---------------------------------------|----------------------|
| <input type="checkbox"/> | \$50 Application Fee | |
| <input type="checkbox"/> | \$225 Tuition Paid | |
| <input type="checkbox"/> | Pastor's Letter of Recommendation | |
| <input type="checkbox"/> | Photo | |
| <input type="checkbox"/> | Essay | |
| <input type="checkbox"/> | School Transcript / Transcript Waived | |
| <input type="checkbox"/> | Late Registration Fee | |

ADMINISTRATIVE NOTES

ADMINISTRATIVE NOTES, continued

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |