

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.			

EMERGENCY POINT OF CONTACT

IN CASE OF AN EMERGENCY person(s) listed below may be contacted concerning any mental, physical, or other health related situation that I may experience while at the Academy.

Name/Relationship	Telephone
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:
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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	
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ADMINISTRATIVE NOTES