

# STUDENT APPLICATION

For enrollment to:

**MORE THAN CONQUERORS COLLEGE**

9335 Nations Ford Road

Charlotte, North Carolina 28273

Phone: 704-679-9122

Fax: 704-522-1106



**ATTACH  
PHOTO  
HERE**

Indicate Status (check one):  Full-Time  Part-Time

Indicate Program (check one):

- |   |   |
|---|---|
| <input type="checkbox"/> School of Christian Ministry AA  | <input type="checkbox"/> Basic Bible Curriculum Certificate |
| <input type="checkbox"/> School of Christian Ministry BA  | <input type="checkbox"/> Biblical Studies AA                |
| <input type="checkbox"/> School of Christian Ministry MA  | <input type="checkbox"/> Continuing Education               |
| <input type="checkbox"/> School of Christian Ministry PhD | <input type="checkbox"/> Broadcasting Television Production |
|   | <input type="checkbox"/> Career Tech                        |

### Instructions

- Fill out application completely using a typewriter or print in ink. The application must be complete to be processed. Forward completed application to the MTCC registrar.
- Enclose a non-refundable \$35.00 fee with this application.

### A. Personal Information

1. Name \_\_\_\_\_  
Last First Middle

2. Street Address \_\_\_\_\_

( ) \_\_\_\_\_  
City State Zip Code Telephone Number E-Mail Address

3. Birth Date \_\_\_\_\_ Place (City & State) \_\_\_\_\_

4. Age \_\_\_\_\_ Sex \_\_\_\_\_ Social Security Number \_\_\_\_\_

5. Marital Status:  Single  Married  Widowed  Divorced

6. Will your spouse be attending?  Yes  No  N/A

7. Is your spouse in agreement for you to attend?  Yes  No  N/A

8. Are you a veteran?  Yes  No

9. Citizen of the U.S.?  Yes  No Do you have your own visa?  Yes  No Race \_\_\_\_\_

10. Do you use tobacco?  Yes  No

11. Do you use intoxicating drinks or drugs?  Yes  No

12. Indicate hobbies or interests \_\_\_\_\_

13. When do you plan to start classes? \_\_\_\_\_

**MORE THAN CONQUERORS COLLEGE** is an equal opportunity Christian Educational Institution. Qualified applicants are admitted without regard to Race, Sex, Color, National Origin, Handicap Status, or Status as a Veteran.

Rev. January 2021



**B. Family Information (If applicable)**

1. Father \_\_\_\_\_
2. Mother \_\_\_\_\_
3. Parent's Address \_\_\_\_\_
4. Spouse \_\_\_\_\_
5. Number and age of children \_\_\_\_\_

**C. Educational Information**

1. High school graduate:  Yes  No

	Name of Institution	Address of Institution	Dates Attended		Course of Study	Type of Degree	Date Received
			From	To			
High School							
College							
Trade School							
Other							

**D. Employment Information**

Name and address of present employer \_\_\_\_\_  
 \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Occupation \_\_\_\_\_ May we contact you at work? \_\_\_\_\_

**E. References**

List three persons (one relative, one friend, and one ordained minister) who have been acquainted with you over the last two years.

Name	Address	Occupation	Telephone



**F. Medical Emergency Information**

(Please provide street address instead of P O Box #)

In case of an emergency please notify:

	Name	Address	Telephone Number
Spouse	_____	_____	_____
Parent/Guardian	_____	_____	_____
Family Physician	_____	_____	_____

**Optional Information**

1. Are you allergic to any antibiotics or other medications? (specify) \_\_\_\_\_
2. Are you now under treatment? If yes, for what? \_\_\_\_\_
3. Do you take medicine regularly? If yes, for what? \_\_\_\_\_
4. Height \_\_\_\_\_ Weight \_\_\_\_\_
5. Do you have any specific physical weaknesses or limitations? \_\_\_\_\_
6. Do you consider your health adequate for intensive school work? \_\_\_\_\_
7. Have you had a tetanus shot in the past 10 years? Yes \_\_\_\_\_ No \_\_\_\_\_

**International Students Only**

8. Please submit an updated health record along with application.
9. Health records, as with all other materials submitted, are considered confidential and are not available for general use. The applicant is to sign below that you have read this statement and authorize the administrators to release necessary health information if they feel it imperative.

**FOR INTERNATIONAL STUDENTS— MUST HAVE INTERNATIONAL INSURANCE - PLEASE PROVIDE VERIFICATION PRIOR TO ARRIVAL.**

Today's Date: \_\_\_\_\_

Applicant's signature : \_\_\_\_\_



**G. Spiritual Information**

1. Home Church

Name \_\_\_\_\_

Address \_\_\_\_\_

Denomination \_\_\_\_\_ Pastor's Name \_\_\_\_\_

2. Have you accepted Jesus Christ as your personal Lord and Savior?  Yes  No

3. Have you received the baptism of the Holy Spirit with the evidence of speaking in other tongues?  Yes  No

4. Do you feel a definite call to full-time ministry?  Yes  No

5. If yes, to what field of ministry do you feel you are called? \_\_\_\_\_

6. State any type of Christian service in which you have been involved \_\_\_\_\_

7. How did you hear about our school? \_\_\_\_\_

**H. Personal Autobiographical Sketch (School of Ministry applicants only)**

**Instructions:** Please write an autobiographical sketch including background information on:

1. A description of your Christian experience (past and present)
2. Experiences which have significantly influenced your life
3. A statement on why you desire to attend the School of Ministry
4. Please limit your sketch to 350 words (if more space is needed, please continue on a separate sheet of paper)

By signing this application, I hereby acknowledge that I have read and agree to abide by The MORE THAN CONQUERORS COLLEGE Statement of Faith and Code of Conduct. I furthermore certify that the information given on this application is, to the best of my knowledge, true and factual. I understand that any false statement made on this application or my refusal to comply with the Code of Conduct is grounds for immediate dismissal from MORE THAN CONQUERORS COLLEGE.

Signature

Date

\_\_\_\_\_

\_\_\_\_\_