



THIRD YEAR APPLICATION FOR ADMISSION

Please complete and mail to:

Admissions

Charis Bible College, Attn: Admissions
800 Gospel Truth Way, Woodland Park, CO 80863
Telephone: (719) 635-6029 Fax: (719) 635-2223
E-mail: admissions@awmcharis.com

FOR OFFICIAL USE ONLY

Date Rec'd _____

Early Tuition Rec'd _____

Student ID # _____

Discount Code _____

**Place 2" x 2"
Photo Here**

If you haven't
previously attended
Woodland Park CO
Campus

1. GENERAL:

Your Name _____
Last Name First Name MI Maiden Name

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Cell/Work Phone: (_____) _____

E-mail Address: (*please print legibly*) _____

Emergency Contact: Name: _____ Phone #: _____

CBC School Attended _____ Name of your Director _____

Year of Graduation _____ Second Year Graduate Third Year Graduate

2. Check Desired School of Study

Business School _____ Ministry School _____ Missions School _____

World Outreach Global Training _____ Worship School _____ Media School _____

Creative Arts School _____ Practical Government School _____

Leadership Program _____ (*Woodland Park night school and many extension locations*)

*The 3rd Year Training Program provides specialized training in the School of your choice. Each track will consist of two Bible Courses per term. **Complete Specific Forms** for Desired School of Study – A response will be sent to you within 4 weeks. **Attendance in Third year is contingent on you having successfully completed Second year.***

3. PERSONAL:

Gender: Male Female

Marital Status: Single Married Separated Divorced Widow/Widower

Date of birth: (mm)____/(dd)____/(yy)_____

Are you a US citizen? Yes No If no, country of citizenship? If no, what type of visa have you obtained to live in the United States? How did you hear about Charis Bible College? _____

Are you a Veteran? Yes No Branch of Service? _____ Do you qualify for VA education benefits? Yes No

A) Have you ever been convicted of a criminal offence (misdemeanor or felony)? Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

B) Have you in the past or are you currently struggling with alcohol or drug addiction? Yes No

If yes, explain, past addictions / current addictions, types of rehabilitation that you have gone through or are currently going through _____

4. PHYSICAL:

Do you have any physical limitations that would require assistance from us in order for you to be successful during your time at Charis?

5. SPIRITUAL:

Date you accepted Jesus Christ as your personal Savior? _____ Date you were baptized in the Holy Ghost? _____

Will your spouse or dependents be attending school with you? If so, please list their names and relationship.

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Name: _____

Relationship: _____



Charis Bible College Worship School

Submit to:

Admissions - Charis Bible College
800 Gospel Truth Way, Woodland Park, CO 80863
or scan and email: admissions@awmcharis.com

Applicant's Name: _____ Date: _____
(Please PRINT)

1. What do you believe God's call is on your life?

2. What is your background and experience with music and/or worship ministry?

3. What are your ministry goals?

4. What are some of your most developed gifts and/or strengths?

5. What are some of your greatest weaknesses?

6. What do you hope to accomplish by participating in the Worship School?

7. What do you see yourself doing in ministry after completing the 3rd year & Worship School?

8. Do you have any physical limitations that would require assistance from us in order for you to be successful during your time at Charis?



CHARIS BIBLE COLLEGE – Worship School

MUSICAL REFERENCE

Note: This section ONLY must be completed by applicant.

TO THE APPLICANT: Each applicant for this program is required to submit a musical reference for review. Please complete this entire section, and then give this form to the person you choose to complete it.

Applicant's Name _____ Male Female

Major Instrument, or Voice Classification _____

Applicant's Signature _____ Date _____

TO THE PERSON COMPLETING THIS REFERENCE: The above-named individual is applying for Charis Bible College's **Worship School program**. Serious consideration will be given to your comments. Thank you for your assistance. Once you have completed the form, please mail it to Admissions listed on the bottom of this form.

Everything below is to be filled out by the reference:

1) Please print or type the information below:

Name _____ Phone (____) _____

Title or Position _____ Email _____

Address _____

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

2) Letter of Recommendation:

Please attach a separate letter to this form providing any additional information, positive or negative, concerning the applicant's musical and/or personal background which you feel will enable us to more accurately evaluate this applicant. Charis School of Worship appreciates and values a candid assessment of all candidates to assist us in our admission decision.

3) Please assess the qualities of this student by checking the most appropriate box for each item listed below:

	Exceptional (one of the top few ever encountered)	Outstanding (top 10%)	Excellent (top 20%)	Average	Below Average	Insufficient basis for judgment (or N/A)
Performance						
Talent						
Application						
Achievement						
Tone quality						
Intonation						
Sense of relative pitch						
Accuracy of rhythm						
Technical facility						
Expressive ability						
Memory						
Facility in sight-reading						
Effort/Concentration						

Character & Personality	Exceptional (one of the top few ever encountered)	Outstanding (top 10%)	Excellent (top 20%)	Average	Below Average	Insufficient basis for judgment (or N/A)
Independence & initiative						
Reaction to criticism						
Sense of responsibility						
Leadership ability						
Verbal skills						
Ability to interact with others						
Positive impact on others						
Respect accorded by instructors						
Respect accorded by peers						
Character and integrity						

4) Please Check One:

Do you recommend that this applicant be accepted as a student to the Charis School of Worship in the degree requested?

- I *highly* recommend I recommend
 I recommend *with* reservation I *cannot* recommend

Reference Signature _____ Date _____

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 Charis Bible College – Worship School
Attn: Admissions, 800 Gospel Truth Way, Woodland Park, CO 80863
 Or scan and email: admissions@awmcharis.com



CHARIS BIBLE COLLEGE – Worship School

PERSONAL RECOMMENDATION

Note: This section must be completed by applicant.

TO THE APPLICANT: Each applicant for this program is required to submit a personal recommendation for review. Please complete this entire section, and then give this form to the person you choose to complete it.

Date _____ Phone _____

Applicant's Name _____

Present Address _____

City _____ State _____ Zip Code _____

TO THE PERSON COMPLETING THIS RECOMMENDATION: The above-named individual is applying for Charis Bible College's **Worship School Program**. Serious consideration will be given to your comments. Thank you for your assistance. Once you have completed the form, please mail it to Admissions listed on the bottom of this form.

1. How long have you known the applicant?

2. What is your relationship to the applicant? (Cannot be a family member)

Highschool teacher/counselor College teacher/counselor

Employer Friend Other: _____

3. How well do you know the applicant? Name/sight Casually Fairly well Very close

4. To your knowledge, has the applicant made a personal commitment to Jesus Christ?

Yes No I don't know

5. To your knowledge, does the applicant: Smoke? Yes No Drink alcohol? Yes No

Use illegal drugs? Yes No Comments: _____

6. Which characteristic(s) best describes the applicant? Please check all that apply.

Critical Enthusiastic Loving Passive Rebellious

Respectful Sympathetic Tolerant Warmhearted

7. To your knowledge, what Christian service is the applicant involved in (such as Sunday school teacher, youth leader, nursery worker)?

8. Please indicate what you consider to be the applicant's strengths.

9. Please indicate what you consider to be the applicant's weaknesses.

10. The applicant's influence on his or her peers is: positive neutral negative I don't know

11. Please evaluate the applicant in regard to the following categories. (Please circle one.)

	Excellent	Above Average	Average	Below Average	Poor	No Chance to Observe
Christian commitment	1	2	3	4	5	6
Social adaptability	1	2	3	4	5	6
Cooperativeness	1	2	3	4	5	6
Integrity and honesty	1	2	3	4	5	6
Responsibility	1	2	3	4	5	6
Mental ability	1	2	3	4	5	6
Physical health	1	2	3	4	5	6
Initiative	1	2	3	4	5	6
Christian character	1	2	3	4	5	6
Emotional stability	1	2	3	4	5	6
Personal appearance	1	2	3	4	5	6
Leadership	1	2	3	4	5	6
Reliability	1	2	3	4	5	6

12. Please add any further comments you may have that would help in our evaluation. _____

Please Check One:

- I *highly* recommend I recommend
 I recommend *with* reservation I *cannot* recommend

Please print or type the information below:

Name _____ Phone (_____) _____

Address _____

Signature _____ Date _____

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