

Welcome to Student

Faith Training Center

S C H O O L O F M I N I S T R Y

Dear Prospective Student:

Faith Training Center is situated on 52 acres in the Foothills of the Blue Ridge Mountains in Walhalla, South Carolina. FTC "School of Ministry" is a place where you can define your calling from God, develop Christian character and be prepared for ministry.

Jesus gave His disciples concentrated and practical training, and they went out and changed the world. This biblical concept is the basis of Faith Training Center, where Jesus, through the Holy Spirit, is still preparing disciples to go into all nations.

You will receive an impartation from anointed teachers, lecturers, missionaries and guest speakers. You will experience practical, hands-on application in work activities and ministry opportunities, putting servanthood into action. FTC is a full-time, live-on-campus program consisting of nine months of training.

Since its conception in 1971, hundreds of students have gone through FTC and into all the world as missionaries, pastors, evangelists, teachers and mission workers.

The world is waiting! The harvest is great! The laborers are few! Do not procrastinate! Come and experience a life-changing opportunity to prepare you to be used by God.

Representing His grace,

Leon Petty
Director



Application for Admission

Faith Training Center

S C H O O L O F M I N I S T R Y

Year you wish to begin study: 20 _____

Personal Information

Name (First): _____ (Middle): _____ (Last): _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____ Email: _____

Phone (Home): _____ (Business): _____

Sex: Male _____ Female _____ Age: _____ Citizenship: _____

Birthdate(M/D/Y): _____ Social Security Number: _____

Passport Number: _____ Expiration Date (M/D/Y): _____
(If no passport, please obtain one prior to beginning of school term)

Status: Single Married Separated Divorced Remarried Widowed

Name of Parent(s) or Legal Guardian:

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ (Business): _____

Do you live with your parents? Yes No

If married:

Spouse's name: _____ Age: _____ Birthdate: _____

Children: _____ Age: _____ Birthdate: _____

_____ Age: _____ Birthdate: _____

_____ Age: _____ Birthdate: _____



A Ministry to the Nations

Year you committed your life to Christ: _____

Have you received the baptism in the Holy Spirit? (Acts 2:4) Yes No

Have you been baptized in water? Yes No

Home Church: _____ Pastor's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

How long have you been a member of this church? _____

Educational Information

High School Name: _____ Phone: () _____

School Address: _____

City: _____ State: _____ Zip: _____

Date of Graduation: _____ / _____ G.E.D.: _____ Highest grade completed: _____
Month Year

College(s) and/or Bible School(s) Attended:				
Name	City/State	Dates Attended	Credits Earned	Degree

Have you ever been dismissed, suspended, denied admission, expelled, or requested to leave any school for any reason? Yes No
If so, please write a brief descriptive statement and attach it to this application.

Military service? Yes No (specify) _____

Financial Information

What financial obligations do you currently have that will compete with your ability to meet your financial obligation for school i.e., home, auto, taxes, medical/hospital, credit card, college loan, personal loan, store credit, child support, etc.? _____ If so, how much? \$ _____

Please describe how you expect to carry these debts while attending Faith Training Center.

How do you plan to pay your school tuition? Payment in Full Monthly Installments.

Will any of your tuition be paid by ...

Your church: \$ _____ Other churches: \$ _____ Individual supporters: \$ _____

Your family: \$ _____ Other: \$ _____

In Case of an Emergency

Please notify:

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Business) _____

Cell Phone: () _____

If accepted as a student, are you willing to submit cheerfully to the leadership and regulations at *Faith Training Center*? Yes I'm not sure.

TO MY KNOWLEDGE, THE INFORMATION THAT IS PROVIDED TO *FAITH TRAINING CENTER* IN THIS APPLICATION IS TRUE AND CORRECT.

Signature of Applicant

Date

If applicant is under 21 and single, the PARENT or GUARDIAN is requested to complete the following:

Is the application completed properly? Yes I'm not sure.

Do you approve of the applicant attending Faith Training Center *School of Ministry*? _____

Signature of Parent or Guardian

Date

Biographical Essay

On a separate sheet of paper, write a brief essay addressing the following questions.

1. Explain your Christian faith, describing your born-again experience.
2. Describe the call of God upon your life and to what particular field of service you believe you are called.
3. In what ways do you feel you will be benefited by attending Faith Training Center.

Essay should be typewritten and no more than three double-spaced pages.

In order for this application to be processed, the following must be completed.

1. Application
2. \$35.00 Application Fee (non-refundable)
3. Biographical Essay
4. Pastor's Recommendation (to be mailed in by the Pastor)
5. Medical Information
6. Financial arrangements and agreements prior to starting school
7. Financial Statements signed
8. A recent photograph (2x2) of yourself

Note:

If you are not able to pay your tuition in full upon entrance to Faith Training Center, then prior to acceptance you must come to an acceptable arrangement for payment with Faith Training Center's financial office. If you chose the option of financial commitment from your church, other churches, family members or friends and supporters, you will find these forms available in your Application packet.

Mail To:

Faith Training Center
Admissions Office
P.O. Box 708
Walhalla, SC 29691

Toll Free: 1-877-449-1776
Email: Admissions@FaithTrainingCenter.org
www.FaithTrainingCenter.org

Faith Training Center does not discriminate on the basis of race, color, national origin, sex, or handicap.

Faith Training Center

S C H O O L O F M I N I S T R Y

Dear Pastor:

Faith Training Center School of Ministry is an extension of the local church with a vision to EQUIP, TRAIN and MOBILIZE members of the body of Christ to reach this generation with the gospel of the Lord Jesus Christ.

OUR COMMITMENT to you is threefold:

1. Before the student is accepted for the course, *FTC* requires your recommendation and input. Our desire is to be fully aware of the applicant's calling, and to be able to minister into specific areas of need.
2. During the course, *FTC* is committed to communicating with you by way of written letters or telephone calls. If the student experiences change in the direction that they see themselves going due to vision imparted while at *Faith Training Center School of Ministry*, the student will need to consult with you before changes are made. We will honor your decision, as our commitment is to you and your oversight. You are invited to come and visit at any time, and to spend time with the student and/or staff.
3. Our objective is for the student to return to their local church to serve or to be sent out following graduation. *FTC* will give all assistance possible to see the graduates find placement in their calling, at home or on the mission field. We can act as a clearing house for their finances, print newsletters, assist them in ministry helps, and support them in prayer and finances as the Lord provides. This will only be done with your recommendation and approval.

OUR COMMITMENT is to serve you and be a blessing in any way we can, to see the kingdom of God established throughout the world.

Representing His grace,

Leon Petty
Director



Faith Training Center

S C H O O L O F M I N I S T R Y

Name of applicant: _____

Applicant's address: _____

Faith Training Center School of Ministry requests that the following waiver be signed before this form is given to the pastor.

I hereby waive the right to inspect or review this confidential recommendation which is part of my admission file and request that it be mailed directly to FTC.

Signature of applicant

Date

To be filled in by the Pastor

The person named above is applying for admission to *Faith Training Center School of Ministry*. Serious consideration is given to this recommendation; therefore we request that you complete this form carefully and candidly. All information will be held in the strictest confidence.

How long have you known the applicant? _____

How well do you know the applicant?

- Just by name and sight
 Casually. Have had a few personal contacts.
 Fairly well. Have had a number of personal contacts.
 Have had a very close pastoral relationship.

To the best of your knowledge, has the applicant made a personal commitment to Jesus Christ? Yes No I don't know

How long has the applicant attended your church? _____

To what extent is the applicant engaged in the activities of your church?

- Is very irregular in attendance, with little interest in activities
 Seldom participates in activities, although regularly attends
 Is cooperative and usually willing to help in the various activities of the church.
 Enthusiastically engaged in the activities for his or her age

In what forms of Christian service has the applicant been regularly active?



How does the applicant usually react in trying situations?

Withdraws Gets discouraged Gets angry Accepts patiently

Evaluation of overall characteristics (please check one under each category)

Physical Condition		Willingness to Serve		Relationships	
<input type="checkbox"/>	Frequently incapacitated	<input type="checkbox"/>	Reluctant to serve	<input type="checkbox"/>	Avoided by others
<input type="checkbox"/>	Below average	<input type="checkbox"/>	Motive confused	<input type="checkbox"/>	Tolerated by others
<input type="checkbox"/>	Fairly healthy	<input type="checkbox"/>	Usually willing to serve	<input type="checkbox"/>	Liked by others
<input type="checkbox"/>	Good health	<input type="checkbox"/>	Eager to serve as needed	<input type="checkbox"/>	Well liked by others
<input type="checkbox"/>	Rugged and vigorous	<input type="checkbox"/>		<input type="checkbox"/>	
Intelligence		Leadership ability		Christian Experience	
<input type="checkbox"/>	Learns and thinks slowly	<input type="checkbox"/>	Makes no effort to lead	<input type="checkbox"/>	Relatively superficial
<input type="checkbox"/>	Average mental ability	<input type="checkbox"/>	Tries but lacks ability	<input type="checkbox"/>	Over emotional
<input type="checkbox"/>	Alert/Has a good mind	<input type="checkbox"/>	Has some leadership ability	<input type="checkbox"/>	Genuine but mild
<input type="checkbox"/>	Brilliant/Exceptional	<input type="checkbox"/>	Good leadership ability	<input type="checkbox"/>	Genuine and growing
<input type="checkbox"/>		<input type="checkbox"/>	Unusual ability to lead	<input type="checkbox"/>	Warmly contagious
Teamwork		Responsiveness to others		Achievement	
<input type="checkbox"/>	Frequently causes friction	<input type="checkbox"/>	Slow to sense how others feel	<input type="checkbox"/>	Starts but does not finish
<input type="checkbox"/>	Insists on having own way	<input type="checkbox"/>	Reasonably responsive	<input type="checkbox"/>	Does only what assigned
<input type="checkbox"/>	Usually cooperative	<input type="checkbox"/>	Understanding and thoughtful	<input type="checkbox"/>	Meets average expectations
<input type="checkbox"/>	Works well with others	<input type="checkbox"/>	Usually responsive and understanding	<input type="checkbox"/>	Takes initiative and finishes

Please check words that describe the applicant. (Choose only a few that stand out)

<input type="checkbox"/>	Teachable	<input type="checkbox"/>	Nervous	<input type="checkbox"/>	Flexible	<input type="checkbox"/>	Easily discouraged
<input type="checkbox"/>	Moody	<input type="checkbox"/>	Dependable	<input type="checkbox"/>	Committed	<input type="checkbox"/>	Humorous
<input type="checkbox"/>	Understanding	<input type="checkbox"/>	Anxious	<input type="checkbox"/>	Tolerant	<input type="checkbox"/>	Wise
<input type="checkbox"/>	Critical	<input type="checkbox"/>	Perfectionist	<input type="checkbox"/>	Domineering	<input type="checkbox"/>	Enthusiastic
<input type="checkbox"/>	Lacking humor	<input type="checkbox"/>	Motivated	<input type="checkbox"/>	Disciplined	<input type="checkbox"/>	Patient
<input type="checkbox"/>	Good Listener	<input type="checkbox"/>	Stable	<input type="checkbox"/>	Peaceful	<input type="checkbox"/>	Easily embarrassed
<input type="checkbox"/>	Prejudiced	<input type="checkbox"/>	Kind	<input type="checkbox"/>	Easily offended	<input type="checkbox"/>	Servant's heart

To your knowledge, has the applicant ever been denied admission or expelled from any other college or Bible school? If yes, for what reason? _____

Does the applicant smoke? _____ Drink? _____ Use drugs? _____

Do you recommend this applicant's admission to *Faith Training Center School of Ministry*?

Yes, unreserved Yes, but with hesitation No

Pastor's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Position: _____ Church Name: _____

Telephone: _____ Church Affiliation: _____

Signature: _____ Date: _____

This student's application cannot be processed until this form is received by our admissions office.

Please send this form directly to:

Faith Training Center: Admissions Office
 P.O. Box 708 Walhalla, SC 29691 Tel: (864) 638-3476 Fax: (864) 638-8581
 Email: Admissions@FaithTrainingCenter.org www.FaithTrainingCenter.org

Medical Information

Social security number: _____

Name of applicant: _____

Medical History

Father's health: _____ Mother's health: _____
If deceased, cause of and age at death If deceased, cause of and age at death

Diseases in your family: Check

Diabetes___Tuberculosis___Nervous Diseases___Heart Trouble___Cancer___High Blood Pressure___AIDS___

Diseases you have had: Check

Chickenpox_____	Typhoid Fever_____	Diabetes_____	Cancer_____
Smallpox_____	Scarlet Fever_____	Stomach Ulcers_____	AIDS_____
Measles_____	Sinusitis_____	Kidney Trouble_____	Hepatitis_____
Mumps_____	Asthma_____	High Blood Pressure_____	Other_____
Malaria_____	Allergies_____	Epilepsy_____	_____
Tuberculosis_____	Heart Trouble_____	Diphtheria_____	_____

Do you have currently effective tetanus toxoid and measles immunizations? Yes___ No___
If not, please obtain or renew prior to arriving.

Have you had any operations? Yes ___ No___ If yes, briefly describe on an attached sheet of paper.

Are you now or have you ever been under the care of a psychologist or psychiatrist?
Yes___ No___ If so, when? _____

Do you have any physical (including diet) limitations? _____

Any falsification of this record will make the applicant liable to automatic dismissal from Faith Training Center. I certify that the information provided above is correct to the best of my knowledge.

Signature of Applicant

Date

Send this form directly to:
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Pastor/ Church Support for FTC Applicant

Faith Training Center

S C H O O L O F M I N I S T R Y

Name of Applicant: _____

Social Security Number: _____

The person named above is applying for admission to *Faith Training Center School of Ministry*. The applicant is prayerfully raising financial support for his/her tuition and other expenses. In order for this arrangement to be complete, we must have the approval of the applicant's pastor, church or fellowship for his/her support. If the Lord leads you to commit to all or part of that need, please complete the following:

I state that my church or fellowship will help financially underwrite the applicant while he/she are at *Faith Training Center*. I have discussed with the applicant the financial support he/she will receive on a monthly basis in the amount of \$ _____ per month, for a total of \$ _____. I understand payment is due the first of each month.

Signature of Pastor or Church Officer

Date

Church Name: _____

Pastor's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Office) _____ (Home) _____

Make checks payable to Faith Training Center and mail to:
Faith Training Center
Financial Office
P.O. Box 708
Walhalla, SC 29691



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NOTE: The IRS states that payments for tuition are NOT tax-deductible.

Faith Training Center

S C H O O L O F M I N I S T R Y

Tuition and Fees

Application Fee: \$35.00 [non-refundable]

Tuition:

Single student \$ 6,500.00*

Married couple \$12,000.00*

Couples with children add:

13 years and older (per child) \$600.00**

6-12 years old (per child) \$500.00**

Pre-school age (per child) \$300.00**

NOTE: * These fees include tuition, textbooks, housing, utilities and meals.
Mission trip expenses are NOT included in tuition.

** These fees include housing, utilities and meals.
(Fees are subject to change at any time.)

Faith Center Academy

Enrollment fee (per child) \$50.00

K4 - 12th grade (per child, per month) \$60.00

(Includes tuition and book fees)

Terms of Payment:

- Application fee is due with application.
- Monthly installments and any special financial arrangements must be approved.
- All financial arrangements must be finalized prior to acceptance.

Make checks payable to Faith Training Center.

Faith Training Center Admissions
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