AFRICA INLAND CHURCH - KENYA FOUNDED IN 1895
Email : masingabible@gmail.com P.O BOX 98 – 90141 MASINGA.

APPLICATION FORM

I. PERSONAL DATA

Full Names (Mr./Mrs/Miss)……..

Date of Birth…….

National I.D Number……..

Email Address……

Telephone No…….

Marital Status (**Please Tick One**). Married.., Single…, Widowed…..Separated…, Divorced…., Remarried…..

Name of Spouse…….Address…….

II. COURSE APPLIED FOR (Tick One)

a. Three Year Programme Regular Diploma in Christian Ministry
(D and Above Form Four Certificate)
b. Two year Diploma in Theology (Scott Christian University) but study in Masinga Bible College. (Regular Only) *(C- and C Form Four Certificate)*
c. One year Certificate in Theology (Scott Christian University) but study in Masinga Bible College. *(D+ Form Four Certificate)*
d. Three Year Programme Parallel Diploma in Christian Ministry
(Mature Entry 27 Years and above, Form Four Leaver)
e. Two Year Programme Regular Certificate in Christian Ministry
(D- and Below)
f. Two Year Programme Parallel Certificate in Christian Ministry
(Form Four Certificate)

III. FINANCIAL STATUS

Explain how you plan to finance your education at Masinga Bible College if any sponsors please indicate and show their contacts.

_____

_____

_____.

VI. RELIGIOUS BACKGROUND AND CHRISTIAN EXPERIENCE

a. Name and address of local Church at which you are a member…….

..……..……..

b. Name and phone No. of your Pastor……

……

c. Name and address of your D.C.C……..

…….....

d. Name and Phone No. of your D.C.C Chairman……...

……..

e. When did you get saved? ……

f. When and where were you baptised?. …….

g. Have you backslidden since conversion?.....

h. List your major involvements in the Christian Ministry……..

..……

……..

i. On a separate sheet of paper tell about your call to the ministry, your Christian experience, reasons for wanting to study at Masinga Bible College and plans for the future after your study.

V. HEALTH HISTORY

Do you have any ill-health issues? YES / NO
If yes, briefly tell us your condition_____

_____

_____

VI. REFERENCES

1. Using the reference form supplied, ask your pastor complete and return the form directly to the College Admissions Department.
2. On a separate paper let your D.C.C Chairman write a recommendation to the college acnkowledging that he knows you and you come from his D.C.C

   NB// The letters can be scanned and send to masingabible@gmail.com or delivered while enclosed for confinediality purposes.

VII. APPLICATION FEE:

After your application is received you will be informed on the interview day and you should come with **1000 Ksh,** for application fee.

VIII. REFERENCE FORM (CONFIDENTIAL)

Please complete this form seal and mail it to the Admissions Office, Masinga Bible College, through 1. P.O. BOX 98, Masinga. 2. masingabible@gmail.com **OR** 3.you can drop it personally in the college office.

We will appreciate your honesty evaluation of the applicant and we will treat your information as confidential.

1. Name of the applicant_____
2. Describe the applicant's personal Character_____

   _____

   _____
3. Describe the applicant's leadership skills and ability_____

   _____

   _____
4. Describe the possibility of the applicant's call to the ministry_____

   _____

   _____
5. How did the applicant portray maturity and experience in any duty given in the church?_____

   _____

   _____

   _____
6. Any further comments feel may be helpful

   _____

   _____

   _____

   _____

Your Name_____ Phone No._____

Desgnation _____

Signature_____ Date_____

Official Stamp.