



STUDENT
APPLICATION
& REFERRAL KIT



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MINISTER'S REFERRAL FORM

MINISTER'S REFERRAL

5. How industrious is he/she in church and ministry responsibilities?

- | | |
|---|--|
| <input type="checkbox"/> Usually a conscientious, hard worker | <input type="checkbox"/> Works harder than most students/workers |
| <input type="checkbox"/> Does about as much work as others | <input type="checkbox"/> Works less than most others |
| <input type="checkbox"/> Very lazy | <input type="checkbox"/> Have no basis for judgment |

6. Describe the applicant's attitude toward you, your church and church activities.

7. Emotional Evaluation:

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Very Stable | <input type="checkbox"/> Unstable |
| <input type="checkbox"/> Stable | <input type="checkbox"/> Very Unstable |

8. Does the applicant respond well to authority?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

9. Is there any other information about the applicant that would help our evaluation?

Name: _____

Address: _____

Position in Ministry: _____ Email: _____

Tel.: _____

Sign & Date: _____

☐ Yes, I am happy to provide accountability for the applicant's Practical Ministry Requirement (PMR).

WORK LIFE REFERRAL FORM

WORK LIFE REFERRAL

5. How industrious is he/she as a worker ?

- | | |
|---|--|
| <input type="checkbox"/> Usually a conscientious, hard worker | <input type="checkbox"/> Works harder than most students/workers |
| <input type="checkbox"/> Does about as much work as others | <input type="checkbox"/> Works less than most others |
| <input type="checkbox"/> Very lazy | <input type="checkbox"/> Have no basis for judgment |

6. Describe the applicant's attitude toward you, work and colleagues.

7. Emotional Evaluation:

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Very Stable | <input type="checkbox"/> Unstable |
| <input type="checkbox"/> Stable | <input type="checkbox"/> Very Unstable |

8. Does the applicant respond well to authority?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

9. Is there any other information about the applicant that would help our evaluation?

Name: _____

Address: _____

Tel.: _____

Email: _____

Sign & Date: _____

PERSONAL REFERRAL FORM

PERSONAL REFERRAL

5. How industrious is he/she?

- | | |
|---|--|
| <input type="checkbox"/> Usually a conscientious, hard worker | <input type="checkbox"/> Works harder than most students/workers |
| <input type="checkbox"/> Does about as much work as others | <input type="checkbox"/> Works less than others |
| <input type="checkbox"/> Very lazy | <input type="checkbox"/> Have no basis for judgment |

6. Describe the applicant's attitude toward you, your mutual friends & other relationships

7. Emotional Evaluation:

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Very Stable | <input type="checkbox"/> Unstable |
| <input type="checkbox"/> Stable | <input type="checkbox"/> Very Unstable |

8. Does the applicant respond well to authority?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

9. Is there any other information about the applicant that would help our evaluation?

Name: _____

Address: _____

Tel.: _____

Email: _____

Sign & Date: _____

STUDENT APPLICATION FORM

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Are you Born-Again (saved) as understood in Romans 10:8-10? ☐ YES ☐ NO
if Yes, How long? _____

Are you baptized in the Holy Spirit with the evidence of speaking in tongues as in Acts 2:4? ☐ YES ☐ NO

In the event of any emergency contact:

Name	Tel.
<input type="checkbox"/> Abuja Weekend School	<input type="checkbox"/> Abuja Night School
<input type="checkbox"/> Port Harcourt	<input type="checkbox"/> Kaduna

Please write bank teller no: _____

STATEMENT OF TRUTH

I hereby state that all the information contained in this application is correct and true. If Rhema Nigeria is notified that any of the information contained in this application is false, it will be grounds for immediate dismissal.

Signature: _____

Date:

DD	MM	YY	EA	R

e.g: 0 5 0 7 2 0 1 3

School Options

Abuja Campus runs weekend classes (Friday 5pm - 9:30pm & Saturday 8am - 5:30pm, fortnightly)
or **@ Night classes**
(Every Sunday, Monday and Tuesday 5pm - 9:30pm)

Port Harcourt Campus runs weekend classes
(Thursday & Friday 5pm - 9:30pm, Saturday 8am - 7pm and Sunday 2pm - 8pm) usually once a month.

Kaduna Campus runs weekend classes
(Thursday & Friday 5pm - 9:30pm, Saturday 8am - 7pm and Sunday 2pm - 8pm) usually once a month.

Rhema  Nigeria

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Address: Plot 1422 (opposite Cool FM gate)

Independence Avenue, Central Area, Abuja.

234(0)807 657 6163; 234(0)810 016 3948



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STUDENT APPLICATION FORM

Please write clearly or type. All blanks must be completed for this application to be processed.

Instructions:

Please read and follow these instructions carefully:

- An application is not processed until all required references, pictures, and application fees are received.

Please be sure the following are included:

- Attach 1 CURRENT (last 3 months) passport photo.
- Enclose teller for 10,000 Naira NON-REFUNDABLE application fee, payable at GTBank Acct.No. 0107777167 Rhema Bible Training Center Nigeria.
- The 3 reference forms must be completed and attached in sealed envelopes, or submitted directly.

* Answer ALL questions. If a question does not apply, write "DNA" (Does Not Apply).

* Your application will not be processed and may be returned if any area is left blank. Be sure to sign all forms.

Full Name (please write your full legal name as it appears on your passport): _____ Title _____

Surname _____ Middlename _____ Firstname _____

Address: _____

Country: _____ Phone #: _____

Email: _____

Passport/Driver's License # (Nigeria): _____

Sex: ☐ Male ☐ Female Date of Birth: _____ Nationality: _____
M F e.g. 2 2 0 8 1 9 8 2

Marital Status: ☐ Single ☐ Divorced ☐ Married ☐ Widowed

☐ Separated** (give details) _____

How many children do you have? Give their names and ages: _____

Affix passport
here



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Name of the church you currently attend: _____

Address: _____

Name of Pastor: _____

Pastor's Phone # _____

How long have you been attending this church? _____

Do you attend regularly? ☐ YES ☐ NO

What church activities have you been involved in? _____

How Long? _____

If You're Not Currently Involved With A Church, Please Explain Why On A Separate Page.

Who were your referral forms given to? (NB: Write your name on the forms before giving them to your referees) Please write clearly the name and address:

Pastor/Minister Referee

Name _____ Tel. _____ Email _____

Personal Referee

Name _____ Tel. _____ Email _____

Work Referee

Name _____ Tel. _____ Email _____



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PERSONAL REFERRAL FORM

PLEASE DETACH THIS FORM ALONG THE DOTTED LINES

To be completed by applicant's personal friend who is not a relative.

Instructions:

To the Referee: This evaluation is for the applicant named below who is applying for admission to Rhema Bible Training Centre Nigeria. Serious consideration will be given to your comments. Please complete this form carefully and in privacy. Since we request a candid evaluation, we will hold your comments in strictest confidence. Therefore, we ask that this completed form be placed in the envelope provided by the applicant, sealed and submitted to RHEMA NIGERIA.

Referee's Name:

Title _____ Surname _____ Middlename _____ Firstname _____

Name of Applicant: _____

1. How long have you known the applicant? _____

2. Describe your relationship:

☐ Very Close ☐ Close

☐ Casual ☐ Distant

3. Please describe the nature of your relationship: (i.e. Manager, Supervisor, Other) _____

4. Please evaluate his/her character by ticking on the appropriate grid:

	Excellent	Good	Fair	Poor	Unknown
Honesty					
Dependability					
Cooperativeness					
Ability to work with others					
Moral character					
Personal appearance					
Consideration for others					
Acceptance of instruction					
Acceptance of discipline					



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WORK LIFE REFERRAL FORM

PLEASE DETACH THIS FORM ALONG THE DOTTED LINES

This form is to be completed by the applicant's current or previous employer, or someone they have been accountable to for secular work of any kind (i.e. Teacher, Volunteer Organization, etc.)

Instructions:

To the Referee: This evaluation is for the applicant named below who is applying for admission to Rhema Bible Training Centre Nigeria. Serious consideration will be given to your comments. Please complete this form carefully and in privacy. Since we request a candid evaluation, we will hold your comments in strictest confidence. Therefore, we ask that this completed form be placed in the envelope provided by the applicant, sealed and submitted to RHEMA NIGERIA.

Referee's Name:

Title _____ Surname _____ Middlename _____ Firstname _____

Name of Applicant: _____

1. How long have you known the applicant? _____

2. Describe your relationship:

☐ Very Close ☐ Close

☐ Casual ☐ Distant

3. Please describe the nature of your relationship: (i.e. Manager, Supervisor, Other) _____

4. Please evaluate his/her character by ticking on the appropriate grid:

	Excellent	Good	Fair	Poor	Unknown
Honesty					
Dependability					
Cooperativeness					
Ability to work with others					
Moral character					
Personal appearance					
Consideration for others					
Acceptance of instruction					
Acceptance of discipline					



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MINISTER'S REFERRAL FORM

PLEASE DETACH THIS FORM ALONG THE DOTTED LINES

This form is to be completed by the applicant's Church Minister, Pastor, or Ministry Elder

Instructions:

To the Referee: This evaluation is for the applicant named below who is applying for admission to Kenneth Hagin's Rhema Bible Training Centre - Nigeria. Serious consideration will be given to your comments. Please complete this form carefully and submit to RHEMA NIGERIA - ADMISSIONS TEAM.

Accountability Commitment: Two of our key aims are:

- To work with local Church leaders, and
 - To provide a very practical training for our students.
- *Both of these aims are fulfilled in part through the student's Practical Ministry Requirements (PMR). We require students attending RHEMA NIGERIA to complete at least 100 hours of practical ministry service in their local church. By recommending the student, you are agreeing to be or provide a PMR Mentor for the student and assist the student in fulfilling their Practical Ministry Requirement.

Referee's Name:

Title _____ Surname _____ Middlename _____ Firstname _____

Name of Applicant: _____

1. How long have you known the applicant? _____

2. Describe your relationship:

☐ Very Close ☐ Close

☐ Casual ☐ Distant

3. Please list what areas of involvement they have had in the Church: _____

4. Please evaluate his/her character by ticking on the appropriate grid:

	Excellent	Good	Fair	Poor	Unknown
Honesty					
Dependability					
Cooperativeness					
Ability to work with others					
Moral character					
Personal appearance					
Consideration for others					
Acceptance of instruction					
Acceptance of discipline					

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