



New Life City Albuquerque, NM School of the Kingdom Application

Greetings from New Life City! Thank you for your interest in our SCHOOL OF THE KINGDOM. We are excited that you are thinking of us for this school and will be happy to answer any questions you have.

Guide to completing the supplement forms

The following items must be submitted before your application can be processed by the school staff. All of the questions must be completed. If a question does not apply to you, write N/A (not applicable). Husbands and wives must complete separate forms. Children each have their own application.

We need each item to complete your application:

- Application Submitted (first 2 pages)
- \$25 Registration Fee
- Supplement Questions
- Spiritual Leader Reference
- Friend Reference
- Employer/Teacher Reference

Application: Please fill out and sign the next 2 pages and submit them with the other forms. These pages will start your file.

Registration Fee: Each applicant must pay a non-refundable \$25 USD registration fee (\$35 per married couple). Your application cannot be processed without it. Please make checks/money orders (U.S. Dollars only) payable to 'NEW LIFE CITY' including a note saying who it is for.

Application Questions: Please prayerfully answer the Application Questions. This is your chance to recommend yourself to the SCHOOL OF THE KINGDOM staff so you can make your answers as detailed as you like.

Confidential References: Three confidential references are enclosed. One reference should be given to each of the following: Friend, Spiritual Leader, Employer or Teacher. Please request that they fill it out and mail it directly to the registrar. You may want to give them a stamped envelope with our address on it.

If you require another copy of any of the forms please email the Registrar .



**New Life City
Albuquerque, NM
School of the Kingdom Application**

Please return this form to:
NEW LIFE CITY Registrar
4830 Pan American Fwy.
Albuquerque, NM 87109

Phone: 1-505-323-3900
Email: office@NewLifeCity.org

**Important!
Attach Recent
Photo Here**

(or email one to the Registrar)

I wish to attend the SCHOOL OF THE KINGDOM beginning:

Registration Fee enclosed: Yes No \$25 per adult or \$35 per married couple

Name: _____

Mr./Mrs./Miss

Present Address

PO Box/Street _____

Town _____

City _____

State/Province _____

Postal Code _____ Country _____

Home Phone (include country code) _____

Cell /Mobile (include country code) _____

Email _____

Permanent Address

Same as present Different:

PO Box/Street _____

Town _____

City _____

State/Province _____

Postal Code _____ Country _____

Home Phone (include country code) _____

Cell /Mobile (include country code) _____

Email _____

Emergency Contact

Name _____

Relationship _____

PO Box/Street _____

Town _____

City _____ State/Province _____

Postal Code _____ Country _____

Emergency Number (include country code) _____

Email _____

Home Church

Name _____

Pastor's Name _____

PO Box/Street _____

City _____ State/Province _____

Postal Code _____ Country _____

Phone _____

Church Email _____

Length of Attendance _____

General Information

Age _____ Country of Birth _____

City of Birth _____

Date of Birth (MM/DD/YY) ____ / ____ / ____

Country of Citizenship _____

Do you have a passport? Yes No In process

If yes, when does it expire? (MM/DD/YY) ____ / ____ / ____

Full name and birth date as it appears on your passport:

Marital Status Please circle one:

Single Engaged Married Separated Divorced Widowed

Maiden Name _____

Spouse's Name _____

Anniversary (MM/DD/YY) ____ / ____ / ____

Number of children accompanying you _____

Name of 1st child _____

Birth date (MM/DD/YY) ____ / ____ / ____ Passport? Yes No In Process

Name of 2nd child _____

Birth date (MM/DD/YY) ____ / ____ / ____ Passport? Yes No In Process

Name of 3rd child _____

Birth date (MM/DD/YY) ____ / ____ / ____ Passport? Yes No In Process

Educational History:

Secondary/High School or equivalent, from which you graduated/will graduate:

Name _____ Location _____

Date of Graduation (MM/DD/YY) _____ / _____ / _____ I did not complete high school.

College/University/Vocational School/Seminary Attended:

Name _____ Location _____ From _____ to _____

Name _____ Location _____ From _____ to _____

Occupational Skills: _____

Musical Ability or other Talents: _____

Miscellaneous Information:

How did you hear about the school? _____

What reasons most influenced your decision to apply for the SCHOOL OF THE KINGDOM ? _____

Financial Support:

Do you have your complete school fees? Yes No/working on it. If yes, from where?

If no, how much do you have at this time? \$ _____ in U.S. Dollars

If no, how do you plan to pay for your schooling? _____

Do you have any outstanding debt? (please explain) _____

Please read then sign and date below in all 3 sections:

I certify that all the information in this application is complete and accurate. I understand that payment of the required school tuition fees must be made prior to, or upon, my arrival unless otherwise approved by the School Director before my departure to Albuquerque, NM. Further, I agree to meet in a timely manner, prior to the completion of the school, all personal expenses incurred during my involvement with the NLC School of the Kingdom. If I am accepted into the NEW LIFE CITY School of the Kingdom, I will abide by the spirit, rules and schedule of the school.

Signature _____ Date _____

Release of Liability
I/we do hereby release New Life City it's staff, agents, and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss which may be sustained by said person(s) during the course of involvement with New Life City.

Applicant's Signature _____ Date _____

Signature of Parent or Guardian if the applicant is under 18 years of age.

Parent/Guardian _____ Date _____ Relationship _____

Consent for Treatment
In case of emergency, I/we hereby agree to the performance of such treatment, including anesthesia and surgery, that the attending doctor or physician may deem necessary.

Applicant's Signature _____ Date _____

Signature of Parent or Guardian if the applicant is under 18 years of age.

Parent/Guardian _____ Date _____ Relationship _____



School of the Kingdom Albuquerque, NM

www.NewLifeCity.org

Application Questions

Please return this form to:
NEW LIFE CITY Registrar
4830 Pan American Fwy.
Albuquerque, NM 87109

Phone: 1-505-323-3900
Email: office@NewLifeCity.org

School of the Kingdom Application Questions

Instructions: In order for us to get to you know better; please prayerfully answer the following questions in as much detail as you like. Please write N/A if a question does not apply to you. Email back your answers or send them on paper with the rest of your documents.

PERSONAL HISTORY

1. Please describe your conversion experience and present relationship with God. How long have you been a Christian?
2. What is your purpose for attending the SCHOOL OF THE KINGDOM? What areas of your character are you presently seeking God to further develop and improve?
3. Describe your present relationship to your local church and leaders, and your involvement there. Are they supportive of your involvement in this school?
4. Do you have any physical disabilities that we should be aware of? Have you had any mental illness? If yes, please describe. Are you presently taking any medication or under a physician's treatment? Do you have any special dietary needs? (i.e. vegetarian, food allergies)
5. Are you presently seeing a professional counselor for any issues? Do you have a need for professional counseling at this time? If yes, for what issues? Have you ever been in a group home living environment or in-patient psychiatric care? If yes, when?
6. If you are married and/or have children, please list these family members with their full name, date of birth and gender. Do they have any disabilities that we should be aware of?
7. Have you ever engaged in drug abuse or the occult? Do you use any tobacco products? (cigarettes, chewing tobacco)
8. How would you describe your relationship with your family? Do your parents approve of you attending the school?
9. Do you have any difficult situations to deal with in regard to attending the School of the Kingdom?



**School of the Kingdom
Albuquerque, NM**

www.NewLifeCity.org

**Confidential Reference
Friend**

Please return this form to:
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4830 Pan American Fwy.
Albuquerque, NM 87109

Phone: 1-505-323-3900
Email: office@NewLifeCity.org

To the applicant:

Name _____

School you are applying for _____

Address _____

I, the above named applicant, WAIVE any right to have or obtain copies of this recommendation knowing that this waiver is NOT required as a condition for admission.

Signature _____

To the Friend filling out this form:

Name _____

Address _____

Phone _____

Email _____

Please send me information on NEW LIFE CITY Outreach

The above named applicant has applied for admission to the School of the Kingdom at New Life City in Albuquerque, NM.

It is important to us, as we evaluate our applicants, that we have a good understanding of their character and ministry abilities. Serious consideration will be given to your comments, therefore we ask that you complete this form carefully. We would appreciate honest, straightforward responses, evaluating both the assets and liabilities of the applicant. Be assured that your reply will be held in strict confidence. Your prompt attention in completing this form is appreciated. Thank you!

Relationship to the applicant

1. My relationship to the applicant is: (circle all that apply) close friend peer mentor acquaintance

2. How long have you known the applicant? _____

3. On a scale of 1-10 (10 = very well), how well do you know the applicant? (circle one) 1 2 3 4 5 6 7 8 9 10

4. Does the applicant know Jesus as their personal Lord & Savior and display Christ in everyday living? How?

5. Is the applicant a reliable friend? _____

6. Comment briefly on how the applicant responds to conflict in relationships. _____

7. In the applicant's relationships, do they tend to lead or follow? _____

Character Evaluation

Please check the appropriate space for each characteristic according to your knowledge of the applicant. If you have not observed this trait, check "not known." Consider the average to be a reasonably well-adjusted individual who is qualified for full-time Christian work.

Personal Character	Not Known	Poor	Below Average	Average	Above Average	Excellent
Self-discipline						
Teachability						
Flexibility						
Perseverance						
Reliability						
Punctuality						
Common sense						
Integrity						
Academic						
Financial responsibility						
Stewardship						
Industriousness						
Response to authority						
Health						

Social Adaptability	Not Known	Poor	Below Average	Average	Above Average	Excellent
Cooperation						
Tactfulness						
Communication skills						
Neatness of person						
Respected by peers						
Positive, contagious spirit						

Emotional Maturity

Self-confidence						
Self-esteem						
Ability to deal with stress						
Accurate view of personal strengths/weaknesses						
Ability to deal w/ interpersonal problems						
Overall emotional maturity						

Spiritual Maturity

Knowledge of the Bible						
Consistency of Christian walk						
Able to share Christ with others						
Concern for others						
Assurance of God's calling						
Respects convictions of others						
Overall spiritual maturity						

Leadership Potential

Initiative						
Willingness to serve						
Decision making ability						
Organizational skills						
Ability to follow						
Ability to motivate others						

Have you noticed these tendencies?	Not Known	Very Apparent	Frequently	Sometimes	Rarely	Never Apparent
Critical						
Argumentative						
Domineering Manner						
Procrastination						
Impracticality						
Irritability						
Anxiety/Worry						
Moody						
Dependant relationships						
Homosexual relationships						
Eating disorders						
Behavioral disorders						
Drug abuse						
Close-minded						
Emotional instability						
Flirting						
Sexual immorality						
Easily embarrassed						
Easily discouraged						
Prejudice						
Impatience						
Gives in to peer pressure						
Arrogant						
Frequent exaggeration						
Lack of humor						
Infatuations						
Dishonest or questionable character						
Involvement with the occult						

Applicant's Giftings

Please check the appropriate space for each gifting according to your knowledge of the applicant. If you have not observed this trait, check "not known."

	Not Known	Poor	Below Average	Average	Above Average	Excellent		Not Known	Poor	Below Average	Average	Above Average	Excellent
Administration							Prayer						
Counseling							Speaking/Teaching						
Hospitality							Working with adults						
Motivating & training others							Working with teens						
Music							Working with children						
One-on-one discipleship							Worship						
Personal evangelism							Other _____						

Questionnaire

In answering the following questions, please comment based upon what you know of the applicant. For any questions which you have no knowledge, please write "not observed." Extra space is available on the back for further comments.

- How does the applicant respond to designated authority and standards? _____

- Can the applicant take responsibility and demonstrate leadership? Give examples. _____

- Comment on the applicant's sensitivity to the needs, feelings, and attitudes of others. _____

- Please comment on the applicant's ability to establish close, healthy relationships with others. _____

- How does the applicant deal with relationships with the opposite sex? _____

- Do you have any reservations concerning the financial integrity of the applicant? (If yes, please explain) _____

- Do you have any reservations concerning the personal integrity of the applicant? (If yes, please explain) _____

- Have you noticed alcohol or tobacco use? _____

- Has the applicant ever been arrested? _____

- Please comment on the applicant's family background. _____

11. Please summarize the applicant's suitability for ministry, adding any considerations that may influence his/her effectiveness.

12. Would you recommend the applicant for the NEW LIFE CITY school he/she is applying for? (please mark one and comment if needed)

____ Unsuitd

____ Average prospect

____ At this time, he/she is unsuitd

____ Great prospect

____ Good prospect, but I have reservations

Please call me, I would like to discuss the applicant over the phone. **U.S. and Canadian residents only**

Please give up to 2 contact numbers including the area code. Please circle which type it is.

Cell / Work / Home # _____

Cell / Work / Home # _____

Additional Comments

I declare that the contents of this confidential reference form are correct to the best of my knowledge.

Name: _____

Signature: _____ Date: _____



**School of the Kingdom
Albuquerque, NM**

www.NewLifeCity.org

**Confidential Reference
Spiritual Leader**

Please return this form to:
NEW LIFE CITY Registrar
4830 Pan American Fwy.
Albuquerque, NM 87109

Phone: 1-505-323-3900
Email: office@NewLifeCity.org

To the applicant:

Name _____

School you are applying for _____

Address _____

I, the above named applicant, WAIVE any right to have or obtain copies of this recommendation knowing that this waiver is NOT required as a condition for admission.

Signature _____

To the Pastor filling out this form:

Name _____

Address _____

Phone _____

Email _____

Please send me information on NEW LIFE CITY Outreach

The above named applicant has applied for admission to the School of the Kingdom at New Life City in Albuquerque, NM.

It is important to us, as we evaluate our applicants, that we have a good understanding of their character and ministry abilities. Serious consideration will be given to your comments, therefore we ask that you complete this form carefully. We would appreciate honest, straightforward responses, evaluating both the assets and liabilities of the applicant. Be assured that your reply will be held in strict confidence. Your prompt attention in completing this form is appreciated. Thank you!

Relationship to the applicant

1. My relationship to the applicant is: (circle all that apply) Sr. pastor Youth pastor Small Grp. Ldr. Mentor

2. How long has the applicant attended your church? _____

3. In your association with the applicant, what has been the level of commitment you have seen exemplified?
(Please circle one) Faithful Inconsistent Other _____

4. Did you know prior to receiving this form of the applicant's intention to attend this program? Yes No

5. Does the applicant know Jesus as personal Lord and Savior and display Christ in everyday living? How?

6. Do you believe that the applicant has a call to missions at this time? _____

7. Is your congregation standing behind the applicant's decision to apply for this school? If no, please explain.

8. In what areas of ministry has the applicant participated in your church? _____

Character Evaluation

Please check the appropriate space for each characteristic according to your knowledge of the applicant. If you have not observed this trait, check "not known." Consider the average to be a reasonably well-adjusted individual who is qualified for full-time Christian work.

Personal Character	Not Known	Poor	Below Average	Average	Above Average	Excellent
Self-discipline						
Teachability						
Flexibility						
Perseverance						
Reliability						
Punctuality						
Common sense						
Integrity						
Academic						
Financial responsibility						
Stewardship						
Industriousness						
Response to authority						
Health						

Social Adaptability	Not Known	Poor	Below Average	Average	Above Average	Excellent
Cooperation						
Tactfulness						
Communication skills						
Neatness of person						
Respected by peers						
Positive, contagious spirit						

Emotional Maturity

Self-confidence						
Self-esteem						
Ability to deal with stress						
Accurate view of personal strengths/weaknesses						
Ability to deal w/ interpersonal problems						
Overall emotional maturity						

Spiritual Maturity

Knowledge of the Bible						
Consistency of Christian walk						
Able to share Christ with others						
Concern for others						
Assurance of God's calling						
Respects convictions of others						
Overall spiritual maturity						

Leadership Potential

Initiative						
Willingness to serve						
Decision making ability						
Organizational skills						
Ability to follow						
Ability to motivate others						

Have you noticed these tendencies?	Not Known	Very Apparent	Frequently	Sometimes	Rarely	Never Apparent
Critical						
Argumentative						
Domineering Manner						
Procrastination						
Impracticality						
Irritability						
Anxiety/Worry						
Moody						
Dependant relationships						
Homosexual relationships						
Eating disorders						
Behavioral disorders						
Drug abuse						
Close-minded						
Emotional instability						
Flirting						
Sexual immorality						
Easily embarrassed						
Easily discouraged						
Prejudice						
Impatience						
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Frequent exaggeration						
Lack of humor						
Infatuations						
Dishonest or questionable character						
Involvement with the occult						

Applicant's Giftings

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	Not Known	Poor	Below Average	Average	Above Average	Excellent		Not Known	Poor	Below Average	Average	Above Average	Excellent
Administration							Prayer						
Counseling							Speaking/Teaching						
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Motivating & training others							Working with teens						
Music							Working with children						
One-on-one discipleship							Worship						
Personal evangelism							Other _____						

Questionnaire

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- How does the applicant deal with relationships with the opposite sex? _____

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- Do you have any reservations concerning the personal integrity of the applicant? (If yes, please explain) _____

- Have you noticed alcohol or tobacco use? _____

- Has the applicant ever been arrested? _____

- Please comment on the applicant's family background. _____

11. Please summarize the applicant's suitability for ministry adding any considerations that may influence his/her effectiveness.

12. Would you recommend the applicant for the NEW LIFE CITY school he/she is applying for? (please mark one and comment if needed)

- | | |
|--|------------------------|
| _____ Unsuitd | _____ Average prospect |
| _____ At this time, he/she is unsuitd | _____ Great prospect |
| _____ Good prospect, but I have reservations | |

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Signature: _____ Date: _____



**School of the Kingdom
Albuquerque, NM**

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**Confidential Reference:
Employer/Teacher**

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To the applicant:

Name _____

School you are applying for _____

Address _____

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Signature _____

To the Employer/Teacher filling out this form:

Name _____

Address _____

Phone _____

Email _____

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Relationship to the applicant

1. My relationship to the applicant is: (circle all that apply) Employer Supervisor Teacher Mentor

2. How long has the applicant been your employee/student? _____

3. List any responsibilities the applicant had in your workplace/classroom _____

4. Has the applicant been an asset to your business/class? (If no, please explain) _____

5. Is the applicant diligent in completing tasks given to him/her? (If no, please explain) _____

Character Evaluation

Please check the appropriate space for each characteristic according to your knowledge of the applicant. If you have not observed this trait, check "not known." Consider the average to be a reasonably well-adjusted individual who is qualified for full-time Christian work.

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Self-discipline						
Teachability						
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Initiative						
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