

ADMISSION FORM 2024

Mr. Mrs. Miss.

Full Name

Attach Photo

Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y	Y	Y

Gender

Male Female

Phone Number

City/Zip Code

Present Address

1. Have you personally received Jesus Christ as your Lord and Savior?
(Ki apuni para Jesu Christ ke apuni laga probhu aru udharkarta koikena loisena, luwanai?) Yes Loise No Luwanai
2. Are you currently working in the ministry?
(Etuh homai teh apuni ministry teh kam kori aseh?) Yes Kori aseh No Koriana
3. Please tell us what kind of ministry you do and where?
(Morom korikena moikhan ke koidibi, apuni keneka kissim laga ministry korieh aru Kote?) Yes Kori aseh No Koriana
4. Do you have any medical condition or physical problem which would prevent you from sitting in a class for several hours a day?
(Ki apuni logoteh kiba bimari aseh ya gau teh digdari, jun para apuni keh class teh hodai din lamba homai nimeteh bhoibole digdari diboleh pare?) Yes Aseh No Nai
5. Do you presently take illegal drug or misuse prescription drugs?
Have you done so in the past?
(Apuni etuh homoi teh naloboleh laga drugs nahoileh dawai khan khai? Ki apuni poila teh khai thakiseh?) Yes Khai No Nakhai
6. Do you take Alcohol Tobacco Smoke Cigarette ? If yes, Tick the box, and when is the last time? Month _____ Year _____
Ki apuni, Mudu Sada Cigarette Khan khai, yedi hoi koile, box teh tick koridibi, aru ketia last khaishe? Moina _____ Saal _____

NAGAMESE FLUENCY KIMAN BHAL PARA NAGAMESE JANE

Tick all applicable boxes. You can:
Kiki pare etu teh (✓) lagai dibi).

Speak
Kobole

Read
Puribole

Write
Likhi bole pare

Applicant's Signature