

LEGACY

CHRISTIAN UNIVERSITY



Application for Admission

Please fill-out entire form, sign and return with \$30 application fee to address at the end.

Degree Applying For: (Check one)

- | | |
|---|---|
| <input type="checkbox"/> Master of Arts in Biblical Studies | <input type="checkbox"/> Bachelor of Arts in Religion |
| <input type="checkbox"/> Master of Arts in Pastoral Ministry | <input type="checkbox"/> BA in Business Administration |
| <input type="checkbox"/> Master of Arts in Youth Ministry | <input type="checkbox"/> BA in Interdisciplinary Studies |
| <input type="checkbox"/> Master of Arts in Theology | <input type="checkbox"/> Certificate in Biblical Studies |
| <input type="checkbox"/> Graduate Certificate in Biblical Languages | <input type="checkbox"/> Certificate in Office Administration |
| | <input type="checkbox"/> Certificate in Youth Ministry |

For Office Use Only: Application Date _____ *Undergrad* _____

Acceptance Date _____ *Graduate* _____

Applicant Information:

Title _____ Last Name _____ First Name _____

Middle Name _____ Maiden Name _____

Are you transferring credits from another institution? Yes/No _____ Which one? _____

Permanent Address _____

City _____ State _____ ZIP _____ - _____

Primary Phone _____ (Is this a cellphone? Yes/No)

Alternate Phone _____ (Is this a cellphone? Yes/No)

Do you use texting? (Yes/No) If so, please list cell service provider _____

Primary E-mail Address _____

Alternate E-mail Address _____

Marital Status _____ Spouse's name _____

Applicant Soc. Security # _____ Gender _____

Date of Birth _____ Ethnicity _____

Citizenship _____ Non Resident Alien (true or false) _____

Present Occupation _____

Place of Employment _____ Work Phone _____

Church Information:

Name of Church Where You Are a Member _____

Denomination _____ Senior Pastor's Name _____

Application for Admission (page 2)

Church's Phone _____ Complete Church Address _____

Do you have a personal saving relationship with Jesus Christ? _____

If so, when did you make that decision? _____

Are you in a church vocation? ____ In what position do you presently serve? _____

Are you a minister? Yes/No Licensed? Yes/No Date _____

Ordained? Yes/No Where? _____ Date _____

Other References:

Name, Address, and Phone Number of Next of Kin not living with you _____

Name, Address, and Phone Numbers of Two Christians (not relatives) For References:

Schools Attended:

	Name and Address	State	Dates Attended	Degree Earned
High School				
College				
Other				

Please send a Request for Transcript form to the schools listed above to request that official transcripts be sent to LCU.

Upon acceptance into LCU, I agree to give cheerful obedience and cooperation to the regulations of Legacy Christian University.

Signature (form is not valid without student's signature) _____ Date _____

Parent's Signature for students under 18 years of age _____ Date _____

Please fill out entire form, sign and **return with \$30 application fee** to address below.