

AUSTRALIA MULTINATION FOR CHRIST COLLEGE
Application and Registration Form

PLEASE WRITE CLEARLY:

Student's Full Name: _____ Tick: (MR () MRS () MISS ()

Address: _____ Post Code: _____

Telephone No. _____ Mobile: _____ Date of Birth: _____

Marital Status: _____ Place and Country of Birth: _____

Spouse: _____ Occupation: _____

Next of Kin and Address Contact: _____

Church Affiliation: _____ Do you attend Church regularly? Yes () No ()

Name and Contact of your Pastor: _____

Have you received Jesus as your Saviour? Yes () No (). Have you been baptised in the Holy Spirit?
Yes () No (). State any type of Christian service you are doing or have
done. _____

Why do you want to study with AMFCC?

Have you ever studied at AMFCC before? _____ If yes, when? _____

Give reasons why you left AMFCC. _____

How did you come to hear about AMFCC? _____. What is your level of
education? _____. List the Bible Colleges you have graduated from before

Declaration:

"I accept the regulations governing the study program as set forth by AMFCC. I will be very faithful in my studies and in the payment of the required fees. All the information I have given above is true."

Student's Signature: _____

OFFICE USE: Secretary: _____ Principal: _____ Director: _____