

CHRISTIAN FAITH INTERNATIONAL TRAINING CENTER

Attach
photo here

APPLICATION FOR ADMISSION

1. Surname _____ First Names _____
2. Postal Address _____

3. Tel. Nos. _____ Work. _____ Home
Cell. No. _____ E-mail address _____
4. Date of Birth _____ Nationality _____
5. Place of Birth _____ Gender _____
6. Fathers Name _____ Tel. No. _____
Address. _____ Cell No. _____
E-Mail. _____
7. Mothers Name _____ Tel. No. _____
Cell No. _____ E-Mail. _____
8. Your Marital Status.
Single { } Married { } Separated { } Divorced { } Re-Married { } Widow(er) { }
9. Number of Children _____ Ages _____
10. If Re-Married please explain reason _____

11. What church do you belong to? _____
 - a. How long have you been a member _____
 - b. How do you rate your attendance? Regular { } Seldom { } Scarcely { }
12. Name and address of the Pastor/Leader/Priest _____
Tel No. _____ E-mail _____

12. What church activities are you currently involved in. _____

13. What is your denominational background? _____

14. Educational Background

	Institution	Years Studied	Papers Attained
Primary School			
Secondary school			
College			
University			

15. How do you describe your health?

Excellent { } Very Good { } Good { } Fair { } Poor { }

16. Are you a Christian? Yes { } No { } If yes since when _____

17. What is the meaning of Christianity? _____

18. Why do you want to study at CFITC? _____

19. What is your Vision/Goal after training? _____

20. How do you hope to pay for your studies at CFITC? _____

21. If accepted, will you obey all the college rules and regulations? Yes { } No { }

22. If you are 18years old and under, a written letter from parents will be required

Signature of Applicant _____ Date _____

Send Form to: PO Box 27759, Sunnyside, 0132 Pretoria. South Africa

Or deliver to

Physical Address: 116 Struben Street, Pretoria 0002. South Africa

Or email to

E-mail: cfite@lantic.net Tel. No. +27 12 323 5616

Cel. No +27 79 154 0258