

## SCHOOL FOR EVANGELISM AND DISCIPLESHIP

1211 S. Glenstone Avenue, Springfield, MO 65804 USA

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## **Application (International)**

Please clearly print or type ALL information on this form. You may refrain from answering any questions which you feel would betray your confidentiality, but the more we know about you the better we can serve you. Return the completed form to your local enrollment office.

## **Student Information**

Status: 🛯 New applicant 🖵 Former student	Email:
Student Number (former student):	Date of Birth:
, , ,	DD/MM/YYYY
Student Name:	Gender: 🗅 Male 🖵 Female
	Title: 🗖 Mr. 🗖 Mrs. 🗖 Ms. 🗖 Rev. 🗖 Dr.
First/Given Middle M	Marital Status:  Single  Married  Widowed  Divorced
Address:	Primary Language:
	Primary Religious Affiliation
	Assemblies of God Other Pentecostal
Country:	Protestant D Roman Catholic
Primary Phone:	
Program of Study	
Mark the program of study for which you are applying only one)	<ul> <li>I agree that it is my responsibility to verify the applicability of SED courses toward my educational goals.</li> </ul>
Christian Service Diploma	Appropriate application fee is included.
Missions and Evangelism	Date:
Spiritual Development	DD/MM/YYYY
Practical Ministry	Print Full Name:
Skills Biblical Studies	
Undeclared	Applicant's Signature
	FOR OFFICE USE ONLY
Date: I recomm	nend this student for the institute-level program he or she has indicated.
DD/MM/YYYY	
Office code: GU Rep	presentative's Signature:
Date: I recomn	nend this student for the institute-level program he or she has indicated.
DD/MM/YYYY	
Global I	University Registrar's Signature: