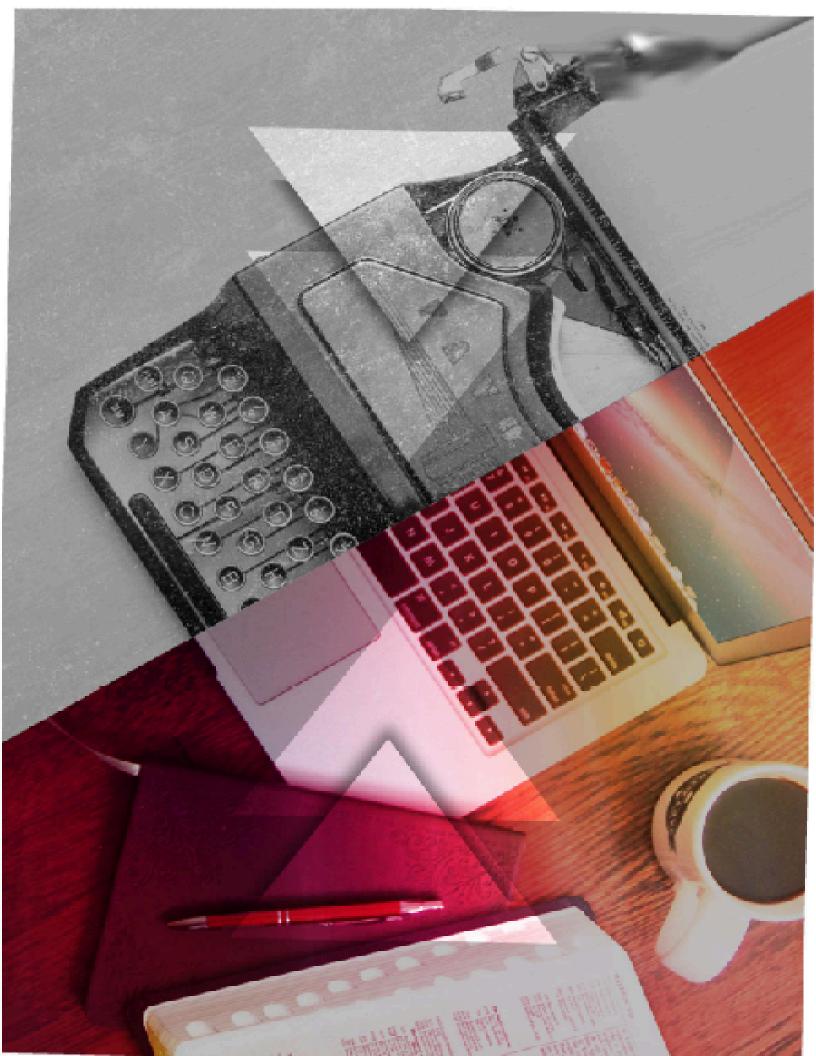


APPLICATION FORM

EQUIPPING YOU FOR PURPOSE



CBC Application

It is important that you read the Application Process before you complete this form. This will be found on a separate sheet enclosed in this application pack or if you down-loaded this from our website then see Application Process on the apply page. Answer ALL questions relevant to your application. Any unanswered questions will result in your application being delayed. If any question does not apply write N/A.

All recommendation forms must be filled out by the relevant people and returned directly to CBC. Be sure to select the application for admission as follows:

Certificate- 1st Year course, for all ages and education levels
 Diploma - 2nd Year Course, for all ages and education levels
 Scholarship - for High School Graduates pursuing 1st year course, which serve 15 hours a week in the ministry

Leadership Academy - CBC Diploma Graduates pursuing call into the Ministry

Your Application can only be processed if you have followed all of the above instructions.



281-491-0504 cbc@carmelglobal.org

Physical Address: Carmel Bible College 12412TX-36 Needville, TX 77461

> Mailing Address: Carmel Church PO BOX 1355 Needville, TX 77461

ID PHOTOS		FOR OFFICE USE ONLY
		Date Received:
		Student ID No:
ATTACH 1ST PHOTO HERE	ATTACH 2ND PHOTO HERE	Application Fee \$50 Interview
Passport Size Photos Only	Do Not Send Application Without Photos	Minister's Recommendation Accepted
	Without Photos	Personal Recommendation Rejected
		Relative's Recommendation Conditional

APPLICATION FOR ADMISSION TO:

CERTIFICATE	DIPLOM	A	SCHOLARSHIP	
1. Full Name:	Title: Mr. Mrs.	Rev.	Dr. Other:	
Last Name:		Maiden Name:		
First Name:		Middle Name:		
2. Contact Det	ails:			
Home No:				
Work No:				
Mobile No:		Email:		
3. Residential	Address:			
City/State:			Zip Code:	
4. Mailing Add	ress: (If not the same as abo	ove)		
City/State:			Zip Code:	

A. PERSONAL AND GENERAL INFOR	MATION
5. Birth Date: Day Month	Year
6. Nationality:	
7. Do you hold a passport? Yes	Νο
8. SSN:	9. First Language:
10. Sex: Male Female	
11. Indicate whether you will be attending CBC a	s: Individual Married Couple
12. List Dependents: (Include those that you support	ort financially)
First Name:	Last Name:
Age: Date of Birth: / /	Relationship:
First Name:	Last Name:
Age: Date of Birth: / /	Relationship:
First Name:	Last Name:
Age: Date of Birth: _/ /	Relationship:
First Name:	Last Name:
Age: Date of Birth: / /	Relationship:
13. Your Present Occupation:	14. Name of Employer:
15. Address of Employer:	
City/State:	Zip Code:
16: Nearest Relative to be notified in case of emo	
Name:	Relationship:
Contact Numbers:	
Home No:	Mobile No:
Physical Address:	
City/State:	Zip Code:
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B. MARITAL STATUS INFORMATION
1. Marital Status:
Single Married Engaged Divorced Widower Widow Separated Remarried
a. Have you or your spouse been previously married: Yes No
b. If yes, give details: How many times: Date of last marriage: / /
2. Personal Data of Spouse/Fiancé:
Title: Mrs. Miss Rev. Dr. Other:
Last Name: First Name:
Contact Numbers:
Mobile No:
Work No:
SECOND YEAR APPLICANTS - GO TO QUESTION 4
3. Other Details: 4. Agreement:
Is your spouse/fiancé Yes No Is he/she in agreement with your decision to attend CBC? Yes No Will he/she be attending with you? Yes No No No No
C. SPIRITUAL DETAILS
SECOND YEAR APPLICANTS GO TO SECTION D
1. Have you been born again according to Romans 10:8-10? Yes No
Place: Date:
2. Have you received the baptism of the Holy Spirit with the evidence of speaking in other tongues according to Acts 2:4?
Place: Date:
3. Have you been baptized as a believer by full immersion in water? Yes No
Place: Date:
4. State your fundamental beliefs:
Do you believe the Bible is God's inspired Word and the only infallible guide in matters pertaining to conduct and doctrine? Yes No
Do you believe in the Trinity - that God is One, but manifested
in three Persons: the Father, the Son and the Holy Spirit? Yes No

Application Form		
C. SPIRITUAL DETAILS CONTIN	IUED	
 8. Addictive Habits (Please give honest, ta Have you ever used: Tobacco Alcohol Illegal or habit forming drugs 		If 'Yes,' date last used: / / If 'Yes,' date last used: / / If 'Yes,' date last used: / /
What drug(s)?		For how long?
We would ask students to abstain from th I will abide by this policy	ne use of tobacco, alcohol o I cannot abide by this pol Date ////	or illegal drugs while attending Carmel Bible College.
D. MINISTERIAL DETAILS		
1. In which church/denomination do you	consider yourself to have	been raised?
2a. State the details of the church you cu		ination
e.g. Pentecostal, Charismatic, Baptist	t, Anglican etc.	
2b. Name and address of Church:		
City/State:		Zip Code:
ony/onato.		

D. MINISTERIAL DETAILS CONTINUED	
3. How long have you attended this church?	
4. What is your position in the church?	
5. List church activities you have been involved in and for how long:	
6. Which church did you attend before?	
SECOND YEAR APPLICANTS - GO TO SECTION H	
7. Do you feel you have a definite call of God on your life to enter the ministry? (into the Five Fold Ministry)	
Yes No Not Sure	
If yes, explain briefly when, how and why you know that you are called of God:	
8. Identify the area(s) of ministry to which you feel God is calling/has called you:	
Missions Pastor Helps Evangelist Teacher Other (Specify):	
9. Do you hold ministerial credentials with any organization? Yes No If Yes, are you: Licensed Ordained Which organization/denomination?	
10. If you are not currently involved with a church, please explain why on a separate page.	
E. CHURCH AFFILIATION AND REFERENCES	
1. Minister's recommendation given to (must be your Pastor):	
Name: Church:	
Contact No:	
Physical Address:	
City/State: Zip Code:	
2. Personal recommendation given to someone who has known you well for a year or more, but not a relative	
Name: Church:	
Contact No:	
Physical Address:	
City/State: Zip Code:	
STANDER HAM MALING ST	1252

F. EDUCATIONAL HISTORY				
1. Check highest level of secular education	on attained: GED	H.S. Diploma	Associates	Bachelors
Masters Doctorate Other (S	pecify):			
2. Have you ever been denied acceptance	or been expelled drop	ned or suspended	from any School/	College/University:
		Jed of Suspended		oollege/onliversity.
Yes No Date: / /				
	·			
3. List the Secondary School educational Name of School	From (Year) to (-	Diploma/I	Degree/etc.
4. Can you read, write and comprehend th	ne English Language?	Yes No		
G. EMPLOYMENT HISTORY				
1. Please list your present and past work				
Name of Employer	From (Year) to (Year)	Occupat	ion/Duties
2. List any occupational/professional skill	s you possess:			
3. If you are currently unemployed, please and personal expenses while attending		ow, including how	you will provide	your tuition fees
L				

H. FINANCIAL HISTORY

The CBC Administration is fully aware that God is able to supply all the needs of our student body. We are also aware that a person's ability and willingness to fulfill his/her financial responsibilities are very significant to successful Christian living. Thus, we desire the following information:

1. Please indicate how you plan to pay your expenses:
Spouse Employment Savings Parents (Amount Promised) \$
Sponsor (Amount Promised) \$
Other (Specify) (Amount Promised) \$
If sponsored, signature of sponsor is required:
Date / /
Signature of sponsor or parent(s) (if applicable)
I. MEDICAL DATA
1. Indicate by checking your physical condition: (E - Excellent, G - Good, F - Fair, P - Poor)
General Health
2. Relate any illnesses / conditions / disabilities you have had or presently have
3. Do you have any known allergies: Yes No
If Yes, specify:
4. Do you experience severe allergic reactions? Yes No
If Yes, do you have an EpiPen? Yes No

	MEDICAL DATA CONTINUED	
	Are you presently taking any form of medication:	Yes No
	If Yes, name of medication/drug:	How often?
	Name of Doctor's Office:	
	City/State:	Zip Code:
8.	Medical Consent: "I hereby grant full and complete permission to CBC or me any emergency treatment, medical or surgical care executing such care I also grant permission for hospital	
	You must check YES or NO and sign on the line below	Yes No
		Date / /
	(Applicant must sign above)	
J.	DECLARATION	
SI	ECOND YEAR APPLICANTS - GO TO QUESTION 3	
1.	Explain briefly on a separate sheet why you want to atte	and Carmel Bible College
2.	Have you previously submitted an application to attend	CBC? Yes No
3.	Are you planning to attend CBC under an international s	study visa? Yes No
4.	If you are under 18 years of age, has consent of parent(s)/guardian been obtained for your studies at CBC?
	Yes No	
		Date / /
	Signature of parent(s)/guardians	
5.	"I understand that all items submitted to CBC as part of I hereby state that all the information contained in this a this information is false, it could be grounds for immedi	application is correct and true. If CBC is notified that any of
		Date / /
	Signature of applicant	
	Data Protection Act Unless otherwise informed, all relevant information containe	ed in this application form will be kept on the CBC database for

use by CBC to maintain student records. It is the policy of CBC not to pass your information to third parties, but to keep you informed of events as necessary. Please read over the data privacy notice and return the completed Keeping in Touch form:

Recommendation Forms

Applicants are required to have a personal and ministerial recommendation for CBC. Please provide contact information of a friend/relative and a minister to be sent a recommendation form. Upon submission of this application each provided contact will be sent a recommendation form to fill out 281-491-0504 cbc@carmelglobal.org

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> Mailing Address: Carmel Church PO BOX 1355 Needville, TX 77461

THIS INFORMATION SHOULD BE SENT DIRECTLY TO CBC AND WILL BE TREATED AS CONFIDENTIAL.

A. Details of Recommendation Friend/Relative

1. Name of Recommending Person:

Title: Mr. Mrs. Miss Rev. Dr.	Other:
Last Name:	Maiden Name:
First Name:	Middle Name:
3. Describe the nature of your relationship:	Pastor Friend Co-Worker
	Ministry Family Other Specify
2. Contact:	
Mobile/Home No:	
Work No:	
Email:	
A Details of Recommendation Minister	
A. Details of Recommendation Minister	
1. Name of Recommending Person:	Other
1. Name of Recommending Person: Title: Mr. Mrs. Miss Rev. Dr.	Other:
1. Name of Recommending Person: Title: Mr. Mrs. Miss Rev. Dr.	Maiden Name:
1. Name of Recommending Person: Title: Mr. Miss Rev. Dr. Last Name:	Maiden Name:
1. Name of Recommending Person: Title: Mr. Mrs. Miss Rev. Dr.	Maiden Name: Middle Name: Pastor Friend Co-Worker
1. Name of Recommending Person: Title: Mr. Miss Rev. Dr. Last Name:	Maiden Name:
1. Name of Recommending Person: Title: Mr. Miss Rev. Dr. Last Name:	Maiden Name: Middle Name: Pastor Friend Co-Worker
1. Name of Recommending Person: Title: Mr. Mrs. Miss Rev. Dr. Last Name:	Maiden Name: Middle Name: Pastor Friend Co-Worker
1. Name of Recommending Person: Title: Mr. Miss Rev. Dr. Last Name:	Maiden Name: Middle Name: Pastor Friend Co-Worker
1. Name of Recommending Person: Title: Mr. Mrs. Miss Rev. Dr. Last Name:	Maiden Name: Middle Name: Pastor Friend Co-Worker

DATA PRIVACY NOTICE

1. Your personal data – what is it?

Personal data relates to a living individual who can be identified from that data. Identification can be by the information alone or in conjunction with any other information in the data controller's possession or likely to come into such possession. The processing of personal data is governed by the General Data Protection Regulation (the "GDPR").

2. Who are we?

Carmel Global Ministries Inc. is the data controller (contact details below). This means it decides how your personal data is processed and for what purposes.

3. How do we process your personal data?

Carmel Global Ministries Inc. complies with its obligations under the "GDPR" by keeping personal data up to date; by storing and destroying it securely; by not collecting or retaining excessive amounts of data; by protecting personal data from loss, misuse, unauthorized access and disclosure and by ensuring that appropriate technical measures are in place to protect personal data.

We use your personal data for the following purposes:

- To enable us to provide a voluntary service for the benefit of the public in a particular geographical area as specified in our constitution;
- To administer membership records;
- To fundraise and promote the interests of the church;
- To manage our employees and volunteers;
- To maintain our own accounts and records (including the processing of gift aid applications);
- To inform you of news, events, activities and services running at Carmel Global Ministries Inc..
- To share your contact details with other departments in Carmel so they can keep you informed about news in the church and events, activities and services that will be occurring in the county you may be interested.

4. What is the legal basis for processing your personal data?

- Explicit consent of the data subject so that we can keep you informed about news, events, activities and services and process your gift aid donations and keep you informed about church events
- Processing is necessary for carrying out obligations under employment, social security or social protection law, or a collective agreement
- Processing is carried out by a not-for-profit body with a political, philosophical, religious or trade union aim provided: the processing relates only to members or former members (or those who have regular contact with it in connection with those purposes)

DATA PRIVACY NOTICE CONTINUED...

5. Sharing your personal data

Your personal data will be treated as strictly confidential and will only be shared with other members of the church in order to carry out a service to other church members or for purposes connected with the church. We will only share your data with third parties outside the church with your consent.

6. How long do we keep your personal data?

We keep data in accordance with the guidance set out within Data Protection Legislation.

Specifically, we retain data while it is still current; gift aid declarations and associated paperwork for up to 6 years after the calendar year to which they relate; and church registers (baptisms, marriages, funerals) permanently.

7. Your rights and your personal data

Unless subject to an exemption under the GDPR, you have the following rights with respect to your personal data:

- The right to request a copy of your personal data which the holds about you
- · The right to request that the church corrects any personal data if it is found to be inaccurate or out of date
- The right to request your personal data is erased where it is no longer necessary for the church to retain such data
- The right to withdraw your consent to the processing at any time
- · The right to request that the data controller provide the data subject with his/her personal data and where possible
- The right, where there is a dispute in relation to the accuracy or processing of your personal data, to request a restriction is placed on further processing
- The right to object to the processing of personal data,
- The right to lodge a complaint with the Information Commissioners Office (UK)

Further processing

If we wish to use your personal data for a new purpose, not covered by this Data Privacy Notice, then we will provide you with a new notice. The new notice will explain the new use of your personal data prior to commencing the processing. It will set out the relevant purposes and processing conditions.

Where and whenever necessary, we will seek your prior consent to the new processing.

8. Contact Details

To exercise all relevant rights, questions or complaints please contact:

Texas Attorney General Ken Paxton PO Box 12548 Austin, TX 78711-2548 www.texasattorneygeneral.gov

KEEPING IN TOUCH

Your privacy is important to us, and we want to communicate with church members in a way which has their consent, and which is in line with US law on data protection. As a result of a change in US law, we now need your consent to how we contact you. Please fill in the contact details you want us to use to communicate with you:

Name:			
Address:			
City/State, Zip:			
Email Address:			
Phone Number:			
Alternative Phone Number:			
	you are confirming that you are consenting to Carmel holding and processing your personal data for the (please check the boxes where you grant consent).		
I consent to the chu	Irch contacting me by: Mail Phone Email		
	ormed about news, events, activities and services Carmel (note you be from the church communications at any time);		
To including my details in the 'Church Directory'.			
	ntact details with the departments in Carmel so they can keep me informed		
about news, ev am undertaking	rents, activities and services that will be occurring in the church and which are directly relevant to the role I g.		
.			
Signed:	Date:		
will not be able to u	ent to all the purposes; one of the purposes or none of the purposes. Where you do not grant consent we se your personal data; (so for example we may not be able to let you know about forthcoming services and		
	ertain limited situations, such as where required to do so by law or to protect members of the public from can find out more about how we use your data from our "Privacy Notice" which is available from our website Feam.		
You can withdraw or change your consent at any time by contacting at info@carmelglobal.org. Carmel Church 12412 TX-36, Needville, TX 77461. Please note that all processing of your personal data will cease once you have withdrawn consent, other			

than where this is required by law, but this will not affect any personal data that has already been processed prior to this point.

