LEGACY SCHOOL OF EQUIPPING
BIBLE COLLEGE

Student Admission Application

"We Are Legacy"

APPLICANT INFORMATION Date of Application: ____ /____ /_____

Semester Applying For: ☐ Spring ☐ Summer ☐ Fall ☐ Winter

Legal Name:

Last name (enter name exactly as if appears on official documents), First name Middle Initial

Preferred name, if not first name:

Birth Date:	☐ **Female** ☐ **Male** ☐ **Married**
_____	☐ **Never Married** ☐ **Widowed** ☐ **Separated**
Month/Day/Year	☐ **Divorced**

E-Mail Address:

Permanent home address:

Number & Street **Apartment #**

City/Town:

County:

State/Province:

Country:

Zip/Postal Code:

How did you hear about Legacy School of Equipping Bible College Inc?

Would you like to join us on Sundays for out time of Equipping? ☐ Yes ☐ No

EDUCATIONAL INFORMATION

High School Name/Location:
Year of Graduation:

List all other educational institutions attended beyond high school, if applicable (e.g., college, university, nursing or business school):

Institution Name/Location	Dates Attended	Major	Credits, Diploma or Degree Earned	Year of Graduation
1.				
2.				
3.				

FINANCIAL INFORMATION

How do you intend to pay your college expenses?

□ **Full payment with each registration**
□ **Apply for Church Matching Scholarship**
□ **Apply for Full-Time Ministry Workers Scholarship**
□ **Cash App/PayPal/MasterCard/Visa**

Credit Card#
Exp. Date CVV# (3 or 4 digits on back of card)

ACADEMIC PROGRAM OPTIONS

Certification/Degree Goal:
□ **Lifelong Learner**
□ **Associate's Degree**
□ **Bachelor's Degree**
□ **Master's Degree**
□ **Doctoral Degree**

Certification in:
□ **Prophetic Ministry**
□ **Ministerial Creative Arts**
□ **Ministerial Leadership**
□ **Worship/Praise Leader Ministry**
□ **Coaching (Ministerial Leadership)**

Major in:
□ **Prophetic Ministry**
□ **Ministerial Administration/Leadership**
□ **Divinity**
□ **Creative Arts**
□ **Biblical Studies**
□ **Oneirology**

Additional Information- Please attach a separate sheet if you wish to provide details of circumstances or qualifications not reflected in the application.

Note: Applicants are expected to immediately notify Legacy School of Equipping Bible College Inc. should there be any changes to the information requested in this application.

ENROLLMENT STATUS

☐ Full-Time ☐ Part-Time

MINISTRY INFORMATION

Church Name: _____

Senior Leadership/Overseer Name: _____

Church Address: _____

Years Attending: _____

Ministry Involvement
(Check all that apply)

☐ Pastor
☐ Apostle
☐ Prophet
☐ Evangelist
☐ Teacher
☐ Elder
☐ Deacon
☐ Worship
☐ Helps Ministry ☐ Children's Ministry ☐ Youth Ministry
☐ Administration
☐ Other/ Specify: _____

Number of Years of Ministry Experience: _____

SALVATION TESTIMONY

Please describe your relationship with Jesus Christ and your call to ministry.

PERSONAL STATEMENT

Why do you desire to attend Legacy School of Equipping Bible College?

REFERENCES

Personal Reference

Name:
Relationship:
Phone:
Email:

Ministry Reference

Name:
Church Name:
Position:
Phone:
Email:

Professional Reference

Name:
Organization:
Position:
Phone:
Email:

TRANSFER CREDIT INFORMATION

Are you requesting transfer credits? ☐ Yes ☐ No. If yes:
Name of Institution:
Credits Requested:
Official Transcript Submitted? ☐ Yes ☐ No

LIFE EXPERIENCE CREDIT

Are you applying for Life Experience Credit?
☐ Yes
☐ No
If yes, request portfolio documentation.

FINANCIAL RESPONSIBILITY

I understand that tuition and fees are my responsibility and agree to comply with all financial policies established by Legacy School of Equipping Bible College.

Applicant Initials _____

STUDENT COVENANT

I agree to:

☐ Conduct myself in a Christ-centered manner.
☐ Maintain honesty and academic integrity.
☐ Respect faculty, staff, and fellow students.
☐ Follow all policies outlined in the Student Handbook.
☐ Represent Christ in both character and conduct.

Applicant Initials _____

APPLICANT CERTIFICATION

Application Fee Payment

A $100 matriculation fee must accompany this application or be paid through one of our online payment processing platforms (Cash App/PayPal). All Applicants must complete this form, sign/date it and mail it, along with your matriculation fee.

Required Signature

☐ I certify that all information submitted in the admission process- including the application and any other supporting materials is my own work, factually true, and honestly presented, and these documents will become the property of Legacy School of Equipping Bible College Inc., to which I am applying and will not be returned to me. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion or revocation of course credit, grades and degree, should the information I have certified be false.

☐ I acknowledge that I have reviewed the application instructions for this application and I understand that all offers of admission are conditional, pending receipt of final transcripts and application fee.

Applicant Signature Date (mm/dd/year)

Print Name:

Acknowledgement

I, _____, understand that a degree from Legacy School of Equipping Bible College Inc., does not guarantee a job or ordination in any specific market or ministry, and is not specifically designed to meet any particular licensing requirements. Although Legacy School of Equipping Bible College Offers accredits degrees and certification, LSE is not listed with the U.S. Department of Education, and a LSE degrees/certifications is specifically not suited for people pursuing jobs as public school teachers, state university professors, state-licensed psychologists, amongst other vocations, and that some states may have restrictions on ways this degree/certification can be utilized in the marketplace (though these restrictions may be superseded by a recent unanimous Supreme Court Ruling, Hosanna-Tabor Evangelical Lutheran Church and School v. Equal Employment Opportunity Commission).

The primary purposes of this degree/certification are not only to equip me for the work of ministry and to help strengthen my relationship with God, but specifically to become an innovative and creative leader within my particular discipline.

Although Legacy School of Equipping Bible College Inc., may help in pointing me to job location services, I am the one responsible to locate any job in my future. I understand it is wise and prudent for me to check with those who are working in the field(s) I desire to work in when I graduate in order to ensure that the path I am on will be acceptable for the specific kind of job or ministry I am pursuing.

I am fully aware that this is a Bible College and ministry, which believes the Bible is the Word of God and that the Bible is the authority upon which my spiritual growth and training will be based.

I declare that I am enrolling in Legacy School of Equipping Bible College Inc., willingly and of my own free will.

Signature of Witness Date (mm/dd/year)

Name of Witness

Address of Witness (Street address/City/ State/Zip Code)

REQUIRED DOCUMENT CHECKLIST

Please submit the following with your application.

☐ Completed Application
☐ Photo Copy of your Government Issued Identification
☐ High School Diploma/GED
☐ Official College Transcript(s)
☐ Resume (if applicable)
☐ Ministry Resume (optional)
☐ Salvation Testimony
☐ Church Sr. Leadership/Overseer Recommendation
☐ Professional Reference
☐ Application Fee

OFFICE USE ONLY

Date Application Received:
Application Complete: ☐ Yes ☐ No
Application Fee Received: ☐ Yes ☐ No
Interview Completed: ☐ Yes ☐ No
Transcript Received: ☐ Yes ☐ No
Church Sr. Leadership/Overseer Recommendation Received: ☐ Yes ☐ No
Professional Reference Received: ☐ Yes ☐ No

Admissions Decision

☐ Accepted
☐ Conditionally Accepted
☐ Deferred
☐ Waitlisted
☐ Denied
Degree Program:

Student ID
Enrollment Date
Admissions Officer
Signature:
Date:

Legacy School of Equipping Bible College

"We Are Legacy"

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Phone: 919-373-5631
Mailing Address: 45 Ravencliff Rdg, Garner NC, 27529