

Name:			
What degree are you applying for:—			
Have you ever been arrested with a fe	elony charge 🔲 Yes 🔲 N	lo	
If yes, please explain on a separate s	heet of paper.		
Please list 2 references with email or	phone numbers.		
1. Name	Ph	email	
2. Name	Ph	email	
All students must write their checks (or partial Master 2: \$500.00; Doctor of Ministry \$70 your tuition invoice will have payment detable made to: CMM at PO 7705 Charlotte, Transcripts and diploma Passport size photo (In color, g	ails from then on; payment on the NC 28241 or pay online at be	nd CPh.D. \$900.00) to: plans are available. Che http://cmmtheology.org	CMM, ecks can
Signature	Date		

CMM College of Theology APPLICATION FOR ADMISSION

PLEASE SUBMIT A RECENT PHOTO WITH APPLICATION

Please PRINT clearly

Last Name	(First)		((Middle or Maiden)			
HOME PHONE	WORK PHONE			CELL PHONE			
SOCIAL SECURITY #	DATE O	F BIRTH (MM/DD/YE	AR)	1 1	SEX	MALE	FEMALE
MARITAL STATUS: SINGLE MAR	RRIED DIVO	RCED OTHER					
PLACE OF BIRTH (City and State)			NAME OF S	SPOUSE			
MAILING ADDRESS					APA	ARTMENT #	ŧ
CITY		ST	ATE		ZIP		
EMAIL ADDRESS		I					
	D	our of Doning d Fr					
	Progra	am of Desired Er	iroilment				
Degree of enrollment Dipl	loma 🗌 A	ssociate 🔲 Ba	chelor 🗌 I	Master Doo	ctorate	CPI	ηD
Area of Study	eology Mir	nistry Christia	an Counseli	ng 🗆 Humar	n Trafficl	king Studi	25
Area of Study			in Counsein		· · · · · · · · · · · · · · · · · · ·	King Otaai	03
BACKGROUND INFORMATION							
Present Occupation:				How Long?	,		
•				How Long?			
Name of Local Church:							
Address: City:				State	Zip		
MINISTRY & CHURCH INFORMATI	ON						
Pastor's Name:				Contact P			
Are you a minister Yes No; Lie	censedYes	No Ordai	ned 🔲 Yes	No Othe	r?		
How long have you been in full-time	service?	years	month	S			
To what denomination or organization	do you belong o	r classify					
yourself? Reference: Relative/Friend:			F	Relationship:			
Address:	City		State	Zip	Ph	none:	
ETHNIC ORIGIN (This information requ	uired by the Civil I	Rights Act)					
Caucasian (Non-Hispanic) As	ian Pacific Island	er Hispanic	Black (Non-F	Hispanic) Amer	rican India	an / Alaska	an
Other: Specify				. ,			
CITIZENSHIP							
Country of Birth	Are v	ou a citizen of the U	Inited States	□Yes□No			
If No, please answer the following ques		2 2 2 3 2 3 2 3 4 7 6 7					
Are you a permanent U.S. resident?		Alien Registration	n #				
Do you presently have a U.S. Visa?							
20 you proceding have a c.o. visa:		Expiration Date:			_		

EDUCATION INFORMATION

City:	County:	State:	
Date of Graduation:			
If you did not graduate, have	ve you obtained a GEDYes _	No, if so when?	
List ALL colleges attended in	n chronological order (latest last)Atta	ach additional sheets, if nece	essary.
Name of Institution:			
City:		State: _	
Dates attended: from	to		
Degree(s) received:			
Hours Earned:		Semester	Quarter
Name of Institution:			
City:		State:	
Dates attended: from	to		
Degree(s) received:			
Hours Earned:		Semester	Quarter
Name of Institution:			
City:		State: _	
Dates attended: from	to		
Degree(s) received:			
Hours Earned:		Semester	Quarter
ou currently enrolled in the last i	nstitution attended? Yes	No.	
, what will be your last date of at		∏ No.	
ou eligible for re-admission to a Academic?	any of the institutions listed?		
DITIONAL INFORMATION	Disciplinary Circle (attach	г <i>өхріанавон</i> у	
you ever been convicted for the	violation of any federal, state, county, etails on an attached sheet.	or municipality law? (Excluding	g minor traffic violations
n approval application & st	art fees due ~ Balance of tuition	must be paid by April 15	~ Checks written to 0
	Master 2 \$500.00; Doctorate \$700.00; Conent plans available. Mail payments: Cl		
herby agree to abide by the high e expectation of CMM in order fo	he best of my ability and have been trut ethical standards set forth by the CMM or my life to bring glory and honor to the gree to follow its doctrinal stand in acco	A College of Theology and to o	conduct myself in accord
ature 3			Date

Please type your name as you want it to appear on your diploma.

Name

School CMM College of Theology

Address PO Box 7705

Charlotte, NC 28241

Phone 704-225-3927

PLEASE PRINT

Please return this application and fees to Jorge Parrott, President.

After you fill this application out, please save it on your computer. Email it to info@cmmtheology.org

Or mail it to Jorge Parrott, PO Box 7705, Charlotte, NC 28241.

Please tell us about your ministry experience.