

RHEMA BIBLE TRAINING CENTER Francistown, Botswana

Student Application - First Year 2021

Private Bag F 183 Francistown, Botswana Cell +267 76169218 Tel +267 2401574 Plot 18831 Selepa, Francistown, Botswana Attach Recent Passport sized Photo Here

| Office | Use Only: | Accepted |
|--------|---------------------------------------|-----------------------|
| | Application Fee Paid | Declined |
| | Pastor's Recommendation Received | Re-Apply |
| | (2) Personal Recommendations Received | Registration Fee Paid |
| | Interview Date Set: | Student ID Number |
| | | |

Application Instructions:

- Your non-refundable application fee is payable upon receipt of your application.
- Answer every question truthfully and accurately.
- If an answer does not apply to you, write "NA" in the space.
- Married couples who are both applying should each submit their own application form.
- Your application may be submitted as a paper application form or you can apple online at rhemabotswana.org.
- Your referees may submit a paper reference or an online reference at rhemabotswana.org within 7 days of your request. (Your application will be processed only after all referees have turned in their references.)
- After your application and all three referrals have been received, RBTCB will phone to arrange for an interview appointment with you.
- After your interview, you will receive, in writing, within 7 business days the result of your application to RBTCB.
- Please do not make final arrangements for attendance at the Bible School until you have formally, in writing, been accepted.

I. GENERAL INFORMATION

| Date of Appl | ication: | For year: 20 | | | |
|-------------------------------------|--|--------------------------------|---|--|--|
| Name | First Name | Surname | Middle Name | | |
| Address | Box Number | City | Country | | |
| Address Plot Number | Location | City | Country | | |
| Phone | Home | Work | Cell (whatsapp) | | |
| Date of Birth | dd mm yy | Tick one: O Male* O Female* | Email address: | | |
| Nationality * | (state country) | Birthplace (village/town/city) | Country | | |
| ID Documents | National ID Number (Omang or other) | Nationality of Passport | Marital Status* Tick One: O Married O Married (traditionally) | | |
| | | Passport Number | O Single O Widow(er) O Separated O Divorced O Remarried O Engaged | | |
| If engaged, name of your fiancé: | | Name: | Cell Number | | |
| For how long have you been engaged? | | | | | |
| | your fiancé born again? | O Yes O No | | | |
| | ur spouse's name: | Name: | Cell Number | | |
| | your spouse born again? | O Yes O No | | | |
| For how long | have you been married? | | | | |

| If Married, are | If Married, are you staying with your spouse? O Yes O No | | | | | | |
|--|--|---------------------------------|--------------|----------|-------------------------------|--|--|
| If no, where o | does your spouse stay? | | | | | | |
| If no, briefly e | explain why you do not stay to | ogether: | | | | | |
| If married, do | es your spouse plan on atter | nding RBTCB? | O Yes | O No | | | |
| If yes, which | programme? | | O First Year | O Second | l Year | | |
| Closest Relative | Name | Phone Number | | Where do | they stay? | | |
| | Relation | Email Address | | | | | |
| Emergency Name | Contact Information | Emergency Contac Cell Number | ct | | Emergency Contact Relation | | |
| *preference is not given regarding marital status, race or whether candidate is male or female | | | | | | | |

II. EDUCATION

| School Attended | Dates | Type of | Level | Degree/Certificate |
|----------------------------|-------|---------|-----------|--------------------|
| Begin with the most recent | | School | Completed | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| Other qualifications: | | | | |
| 1. | | | | |
| 2. | | | | |

III. EMPLOYMENT HISTORY

Please list most recent or current employer first

| 1. Company | | Employer Name | Dates employed: MM/YYYY to MM/YYYY | |
|---|-----------------|---|---------------------------------------|--|
| Position | | Reason for leaving (If this is not your current employer) | | |
| Company Phone Company Mailing ar Number | | nd Physical Address | City/Country | |
| 2. Company | | Employer Name | Dates employed MM/YYYY to MM/YYYY | |
| Position | | Reason for leaving | | |
| Phone Number | Mailing Address | | City/Country | |
| 3. Company | | Employer Name | Dates employed: MM/YYYY to MM/YYYY | |
| Position | | Reason for leaving | | |

IV. REFERENCES

Give each of those you list a reference form or the link to the online recommendation form. The reference forms may not be submitted by the prospective student (yourself) Please follow up to be sure your referees have submitted forms to RHEMA within 7 days of receiving the form or link.

| 1. Pastor's Name | Mailing Address | Phone |
|------------------------------|------------------------|-------|
| Name of Church/ Denomination | Length of acquaintance | |
| 2. Friend's Name | Mailing Address | Phone |

| Nature of Acquaintance: (casual, close, etc) | Length of acquaintance | |
|--|------------------------|-------|
| 3. Employer's Name | Mailing Address | Phone |
| Name of Business | Length of acquaintance | |

V. HEALTH

Your health (and all) information is kept strictly confidential and is viewed by RHEMA Administration only.

| Are you experiencing a handicap, disability or disease that would affect your ability to learn or attend class or that RHEMA Administration should know about in case of emergency? (example: heart issues, epilepsy, asthma, mental health issues) <i>This information is kept strictly confidential for Administration ONLY.</i> | | | | | | |
|--|----------------------------|-----------------------------------|--|--|--|--|
| Condition: | How long have you had this | Are you using medication for this | | | | |
| | condition? | illness? | | | | |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| Comments on your overall health: | | | | | | |
| | | | | | | |

VI. SKILLS AND COMMUNICATION

Column 1, please indicate your mother tongue. Column 2 and 3, please indicate your ability spoken and written. Continue with the second line for your second language.

| Language: | Spoken | | | | Written | | | |
|--|--|---------------------|-------------------|------------|------------------|-----------------|--------------------|----------|
| Mother tongue: | How well do you speak your mother tongue? | | | How well d | o you wr | ite your mo | other tongue? | |
| | (circle one) | | | | (circle one) |) | | |
| | Excellent | Good | Fair | | Excellent | Goo | d | Fair |
| Secondary | Spoken | | | | Written | | | |
| language: | How well do y | ou <i>speak</i> you | ur secondary | | How well d | o you <i>wr</i> | <i>ite</i> your se | cond |
| | language? (c | ircle one) | | | language? | (circle o | ne) | |
| | Excellent | Good | Fair | | Excellent | Goo | d | Fair |
| Other | Spoken | | | | Written | | | |
| languages | _ | ou speak the | other language | s? | How well d | • | ite other la | nguages? |
| | (circle one) | | | | (circle one) | | | |
| | Excellent | Good | Fair | | Excellent | Goo | d | Fair |
| Please rate | ease rate Tick one: | | | | | | | |
| your grasp of | O Excellent, I prefer English | | | | | | | |
| the English | O Good, I speak my mother tongue usually, but English is not a problem | | | | | | | |
| language. | | | erstanding or co | | • | | • | ge |
| | | | nd much of what | | | | • | |
| What areas of | O Pastor | O Tead | | _ | , | O Music | • | |
| ministry | O Children | O Yout | | | • | | , instrumer | ntal |
| interest you? | O Ushering | O Mair | itenance (buildir | ıg, vel | hicle, office of | equipmer | nt, etc) | |
| (tick all that | O Other | | | | | | | |
| apply) | | | | | | | | |
| Do you sense you are called to full-time ministry? Tick one: O Yes O No O Not Sure | | | | | | | | |
| If yes, to which area of ministry do you feel called? | | | | | | | | |
| Are you planning to attend RHEMA's second year programme? O Yes O No O Not Sure | | | | | | | | |
| Other areas of interest: | | | | | | | | |
| | | | | | | | | |
| Other skills you h | ave which will a | assist you in s | serving the Lord | in full | time or sup | portive m | inistry: | |
| | | | | | | | | |
| | | | | | | | | |

VII. SELF EVALUATION/MINISTRY PROFILE

| On a scale of 1 to 5, rate yourself in the f | ollowing areas: | | |
|--|----------------------------------|--|----------------------------|
| 5 - Excellent, extremely easy 4 - I do well with a few exceptions. | 3 - Average 2 - Below average | 1 - I usually strugg | le with this. |
| Relating to new people Conversations with a stranger Problem solving Ability to submit to leaders Sense of humor Encouragement to self | Mair Liste Con Abil | blishing relationships ntaining friendships ening fronting ity to finish tasks at ha ouragement to others | and |
| In 250-300 words, please describe your r | elationship with your wi | fe and/or family: | |
| | | | |
| | | | |
| | | | |
| In 250-300 words, please describe your b | oest friend (other than Jo | esus) <u>:</u> | |
| | | | |
| | | | |
| What tends to upset you? | | | |
| VIII. PERSONAL HISTORY Please answer the questions carefully an Training Center. | nd truthfully. Failure to d | lo so may result in dis | emissal from the Bible |
| Have you ever been involved in the use of the so, please explain. Include the last time | _ | O Yes | O No |
| Have you ever been involved with witchchealers or prophets) or performed as one If so, please explain. Include the last time | of the above mentione | | nas or traditional O No |
| Have you ever been arrested for committed If so, please explain. Include the last time | | O Yes | O No |

| Have you ever been involved in homosexuality? O Yes O No If so, please explain: | | | | | | | | |
|---|---|--------------------------|---|--|--|--|--|--|
| If not married, are you presently involved in any kind of dating relationship? O Yes O No If so, please explain: | | | | | | | | |
| IX. BIOGRAPHICA Please answer the follo | AL INFORMATION wing questions as fully a | s possible on separate s | heets of paper. | | | | | |
| | | | ude where you grew up, family affect what God has planned for | | | | | |
| Are you a born again believer? Have you been baptized in water since you believed? O Yes O No | | | | | | | | |
| | d in the Holy Ghost with t | | d about your personal growth in in in other tongues? If so, please tell | | | | | |
| | our life, your personal de | | de how your faith is growing, the rch involvement and outreach | | | | | |
| In 250-300 words, plea explain. | se share who has made | the biggest impact on yo | ur life, besides Jesus? Please | | | | | |
| In 250-300 words, plea | se list and explain three o | of your strengths. | | | | | | |
| In 250-300 words, please list and explain three of your weaknesses. | | | | | | | | |
| | se share why you want to xpect to learn and receiv | | raining Center? Why this particular TCB? | | | | | |
| X. FOREIGN (non-Batswana) STUDENTS ONLY | | | | | | | | |
| Where is your "home" (| country of Birth / country | where your passport is f | rom)? | | | | | |
| City | Country | | | | | | | |
| If you are residing in Bo | otswana, have you comp | <u> </u> | oor procedures? Yes O No | | | | | |
| Visitors: When do your | Who is your conta | | a? (associated with your permit) | | | | | |
| days or permit | | | | | | | | |
| expire? | Name | Address | Phone | | | | | |
| | o RBTCB, how do you pro le School? Please explai | | f (and wife and family if applicable) | | | | | |

XI. STATEMENT OF FAITH

Please place a tick next to each statement to indicate your understanding and agreement with each of RHEMA's fundamental statements of belief:

- O The Bible is the inspired Word of God.
- O Our God is One, but manifested in three Persons—the Father, the Son, and the Holy Spirit.
- O Man is a created being, made in the likeness and image of God, but through Adam's transgression and fall, sin came into the world.
- O Salvation is the gift of God to man through faith in Jesus Christ.
- O The New Birth is necessary to all men, and when experienced, produces eternal life.
- O Baptism in water is by immersion, is a direct commandment of our Lord, and is for believers only.
- O The Baptism in the Holy Ghost is a gift and is accompanied by the initial evidence of speaking in other tongues.
- O We believe in sanctification, which is living a life of holiness.
- O Healing is the privilege of every member of the Church today provided through Jesus' death on the Cross.
- O Jesus will return and "...the dead in Christ shall rise first: Then we which are alive and remain shall be caught up together with them in the clouds to meet the Lord in the air..." (1 Thessalonians 4:16–17).
- O The one who physically dies in his sins without accepting Christ is eternally lost, and therefore, has no further opportunity of hearing the Gospel or repenting.

XII. SIGNATURE

In order for a person to assume a leadership role in Christian ministry, it is our conviction that the highest standards of personal conduct and moral living should be maintained. Our persuasion is that this includes abstinence from the use of tobacco, alcohol and illegal or habit forming drugs while attending RBTCB. We do not accept or permit any immoral conduct related to fornication, adultery, homosexual activities. Understanding our position on these matters, please confirm below your acceptance of these inherent requirements. Non-compliance could exclude you from acceptance.

| By signing below, you acknowledge that you have read and understand RHEMA's fundamental beliefs, are | | | | | |
|---|------|--|--|--|--|
| willing to adhere to RHEMA's standard of student conduct and that the information supplied in this application is | | | | | |
| accurate and true to the best of your knowledge. | | | | | |
| | | | | | |
| Signed | Date | | | | |
| | | | | | |

Thank you for taking time to complete this application. May the Holy Spirit lead and direct every step you take as you endeavor to follow wholly after His plan for your life.