

Applicant Requirements for Enrollment in Victory World Missions Training Center (VWMTC)

Character and Christian Experience

VWMTC's purpose and objectives require that each student has had a genuine born-again experience and manifests a lifestyle dedicated to Christ. An applicant must give evidence of a sound moral character and a willingness to live in harmony with the standards and ideals of VWMTC as expressed in the VWMTC Code of Conduct. The applicant should be a person who has demonstrated spiritual strength and emotional stability prior to applying for enrollment in VWMTC. VWMTC reserves the right to remove any student for immoral conduct or other significant incompatibility with VWMTC's Christian character standards.

Education

Applicants must have completed high school (Grade 12 or GED). It is highly desired that the applicant has completed one year of Bible foundational courses, such as a first year program at a recognized Bible institute. Equivalent ministry experience and educational background will be considered on a case by case basis.

Age

Applicants must be at least 17 years of age.

Application Fee

A non-refundable \$35 application fee is required with each application. A check or money order may be sent to the attention of the VWMTC, Victory World Missions office noting the applicant's name on the memo line.

How to Apply

Complete and submit the following items to the Victory World Missions office:

1. Application

A. All questions on the application must be completed. If a question does not apply to you, write N/A (“not applicable”) in the space provided. If there is insufficient space to answer a question, such as in regard to education or employment experience, attach a neat word processed sheet, with your name and topic heading at the top of the page.

B. Please include a recent color photo of yourself (head and shoulders). School photos are ideal.

2. Statement of Purpose – Complete this form in your own words. Your statement will be held in confidence.

3. Pastor’s Recommendation – If your pastor is your parent or spouse, ask another member of the church’s pastoral staff to complete this form.

4. Personal Recommendation – This form should be completed by a high school or college teacher, an employer or a friend. This person should not be a relative.

5. Student Medical History – A recent copy of the results of a physical examination is required, completed within the past 6 months.

6. Transcripts – Submit official transcripts from your high school and any college-level courses taken or courses taken from a Bible institute or seminary. Transcripts should be sent directly from your school to the VWMTTC office, with affixed school seals.

7. Application Fee – A non-refundable \$35 application fee is required with each application. Check must be made out to VWMTTC.

Note: All personal information will be held in confidence and used only for official purposes. Please be sure to use sufficient postage when mailing your application form.

After You Apply

Your file cannot be reviewed for admission until the VWMTTC office has received each form fully completed. This includes the application, statement of purpose, pastor’s recommendation, personal recommendation, medical history form, all transcripts, photo and \$35 application fee. Once this information has been received in full, your file will be reviewed for admission. Your Admission Advisor will notify you of the school’s decision.

Once you have been accepted, you will soon receive a packet containing financial information, academic calendar dates, orientation and registration information.

Victory World Missions Training Center Application for Enrollment

FOR OFFICE USE ONLY

Date Rec'd _____ Fee Rec'd. _____

By _____

PHOTOGRAPH
Head and shoulders, color
(Application is not complete
without photo)

When do you plan to attend? Quarter ____ Year 20 ____

Name _____

Present Address _____

City _____ State _____ Zip _____

Phone (____) _____ (____) _____

Country _____

Passport number _____ Expiration date _____

PERSONAL

Gender: _ Male _ Female

Marital Status: _ Single _ Married _ Separated _ Divorced _ Widowed

Have you previously attended VWMTC? _ Yes _ No

If yes, last term attended: _____

Date graduated from high school/GED ____/____

Birth Date (mm/dd/yyyy) ____/____/____ Age _____

Social Security Number _____ - _____ - _____

Birthplace: City _____ State _____ Country _____

SPIRITUAL

When did you accept Christ as your personal Savior? ____/____

Have you had an Acts 2:4 experience? _ Yes _ No

Do you attend church regularly? _ Yes _ No Are you a member? _ Yes _ No

State any type of Christian service you have done:

Home church/denomination

Pastor's name _____

Phone (____) _____

Address of church

FAMILY

Spouse:

If married, name of spouse _____

Birth date ____/____/____ Age _____

Occupation _____

Children: (please answer the following for children living with you):

Name _____ Birth date _____ M ___ F ___

Name _____ Birth date _____ M ___ F ___

Name _____ Birth date _____ M ___ F ___

Name _____ Birth date _____ M ___ F ___

Denominational preference _____

Name of your parent or guardian (Living? _ Yes _ No)

Address _____

City _____ State _____ Zip _____

Phone (_____) _____

Are you a citizen of the U.S.? _ Yes _ No

If no, country of citizenship: _____

If naturalized, give the date you were naturalized _____

Are you a resident alien? _ Yes _ No

If yes, please include a copy of U.S. government authorization (green card or other)

EDUCATION

High school _____

Dates attended _____ did you graduate? _ Yes _ No

College _____

Dates attended _____

Course of study/degree conferred _____

Bible Institute/ Seminary _____

Dates attended _____

Course of study/degree conferred _____

Other Education? _____

EMPLOYMENT EXPERIENCE (Past 5 Years)

Present employer: _____

Address of employer: _____

Dates (from/to): _____

Duties performed: _____

Past employer: _____

Address of employer: _____

Dates (from/to): _____

Duties performed: _____

HISTORY

Have you been involved with/used in the past or are you currently using/involved with:

Illegal drugs? Yes No If yes, date of last use? _____

Tobacco? Yes No If yes, date of last use? _____

Alcohol? Yes No If yes, date of last use? _____

Homosexuality/lesbianism? Yes No How long since involved? _____

Have you ever been arrested? Yes No If yes, when ___/___

If yes, attach brief explanation. _____

Were you convicted? Yes No If yes, attach brief explanation

HEALTH

Please describe physical or emotional conditions, and state any special attention or treatment required.

Has your education/employment been disrupted for any period of time because of a physical problem or nervous disorder? Yes No

FINANCES

How do you plan to pay for your education? _____

How did you hear about Victory World Missions Training Center?

I was recruited by _____

AGREEMENT

I hereby certify that I have read the Victory World Missions Training Center **Code of Honor** and **Statement of Faith**. I accept them, including observance of the specific standards of conduct stated therein, while a student of Victory World Missions Training Center.

Yes No

I understand that Victory World Missions Training Center reserves the right to require the withdrawal of any student who is considered to be out of harmony with the philosophy of Victory World Missions Training Center.

Yes No

Please return this form to:

Victory World Missions Training Center
7700 South Lewis Ave
Tulsa, OK 74136

Applicant's Signature _____ Date _____

Victory World Missions Training Center Code of Honor

Honor is a concept that is one of the cornerstones of the Christian faith. The term “honor” means integrity, upright, respect of having a good name. By signing the Code of Honor, you are committing to living a lifestyle of the highest level. In this act of commitment, you are recognizing that Victory World Missions Training Center is committed to helping you live a life of the highest caliber with regard to reputation, respect, honesty and moral integrity.

My signing today is my acknowledgement to honor the Lord Jesus Christ and Victory World Missions Training Center, and to adhere to the following standards of a Christian Lifestyle:

- I commit to apply myself wholeheartedly to my academic studies and intellectual pursuits for the glory of God.
- I commit to grow in my spiritual pursuits by developing a personal relationship to the Lord Jesus Christ through Bible study, prayer and worship.
- I commit to developing the whole person in body, mind and spirit.
- I commit to cultivating good relationships by a lifestyle of integrity and honesty. In so doing, I will not lie, cheat, steal, gossip, or back-bite.
- I will speak well of and submit to my class instructors, school staff, field supervisors, indigenous leadership, and my U.S. based leadership.
- I will refrain from practices outside of the cultural norms of my field of assignment.
- I will refrain from business involvement on the mission field.
- I will maintain good personal hygiene habits.
- I will promote a lifestyle that will influence all other students positively.
- I commit to take care of my financial obligations in a timely manner and will refrain from loaning and borrowing money during my time in school and subsequently on the field.
- I commit to live a life of purity and integrity. To this end, I will keep from any illegal or unethical acts. This would include, but not be limited to: sexual immorality, sexual misconduct, homosexual behavior, the taking of illegal drugs, the drinking of alcoholic beverages, and the viewing of pornographic materials—including internet pornography. I will not physically or verbally abuse any person or thing.
- I commit to be punctual and participate in all required services, activities, and meetings held in relationship to the school and to my field of deployment.
- I commit to abide by the rules and regulations of Victory World Missions Training Center which may from time to time be altered or changed by the institution. I understand that in order to maintain the highest levels of training and to safeguard its ideals of spiritual and moral values, VWMTTC reserves the right to require the withdrawal of any person if, in the judgment of the Director of VWMTTC or the administrative team of Victory Christian Center, the conduct of the person is deemed to violate VWMTTC's ideals of missionary endeavors or its spiritual or moral atmosphere as a Christian institution.

The signing of the Code of Honor acknowledges that I have read and agreed to the above criteria for acceptance in to VWMTTC. Any violation of this Code is grounds for dismissal by Victory World Missions Training Center.

I, the undersigned, hereby state that I am in full agreement with the VWMTTC Code of Honor.

Signature _____

Date _____

Victory World Missions Training Center Statement of Faith

We believe that the Bible is divinely inspired by God. It is faultless and is the sole and final authority for all matters of our lives (2 Timothy 3:16, Hebrews 4:12, 2 Peter 1:21).

We believe in the eternal Godhead who has revealed Himself as one God existing in three persons, Father, Son and Holy Spirit (Matthew 28:19, 2 Corinthians 13:14).

We believe that man by nature is sinful and unholy. He is unable to attain God's righteousness apart from regeneration through the Lord Jesus Christ (Romans 5:8-10).

We believe in the Lord Jesus Christ, the Savior of all men, conceived of the Holy Spirit, born of the Virgin Mary. He is totally God and yet, totally man (Luke 1:26-35, John 1:14-18, Isaiah 7:14, 9:6, 7).

We believe Christ died for our sins, was buried and rose again on the third day (1 Corinthians 15:1-4).

We believe in the bodily ascension of Jesus to heaven and that He is coming again a second time for His Church (John 14:2-3, 1 Thessalonians 4:13-18, Hebrews 9:28).

We believe in the salvation of sinners by grace, through repentance and faith in the work of the Cross (Ephesians 2:8-9, Hebrews 9:12, 22).

We believe in the baptism of the Holy Spirit as a real experience at or after salvation. Believers can then speak in tongues as the Spirit gives them the utterance (Acts 2:1-4, 8:14-17, 10:44-46).

We believe in the operation of the gifts and ministries of the Spirit that are listed in 1 Corinthians 12-14 and Ephesians 4.

We believe that miraculous physical healing and deliverance in the name of Jesus is still for us today (Mark 16:17, Acts 4:30, Romans 8:11, 1 Corinthians 12:9, James 5:14).

We believe in eternal life for believers (John 3:16, 5:24) and eternal punishment for unbelievers (Mark 9:43-48, 2 Thessalonians 1:9, Revelation 20:10-15).

We believe that there is one true Church that is made of genuine believers with Jesus as the head. However, this one Church is composed of many local churches in different localities (Matthew 16:18, Acts 9:31, Ephesians 5:23).

Victory World Missions Training Center PASTOR'S RECOMMENDATION

TO THE APPLICANT: This recommendation should be completed by your pastor and mailed directly by him or her to the Victory World Missions Office. If your pastor is your parent, spouse, or other family member, ask another member of the church's pastoral staff to complete this form. If a person other than your pastor (assistant pastor or youth pastor) completes the form, an explanation should be provided.

Date _____
Phone (_____) _____
Applicant's Name _____
Address _____
City _____ State _____ Zip _____
Country _____
Country of Citizenship _____

CONFIDENTIALITY:

Under the provisions of the Family Educational Rights and Privacy Act of 1974, registered students and alumnae/alumni have access to their educational records, including letters of recommendation for admission. The Act further provides that applicants may waive that right in order to offer confidentiality to those making a recommendation. Please indicate your decision in this matter and sign.

- I waive my right to review this letter of recommendation.
- I do not waive my right to review this letter of recommendation.

Applicant's Signature _____ Date _____

TO THE PASTOR: The above named is applying for admission to Victory World Missions Training Center. Thank you for your assistance.

1. How long have you known the applicant? (Must be six months or longer.)

In what capacity? _____

2. How well do you know him/her (Please check one.)

Very well- pastoral relationship Fairly well-numerous personal contacts

Casually-few personal contacts By name/sight only

3. To your knowledge, has the applicant made a personal commitment to Jesus Christ?

Yes No I don't know

4. To what extent is the applicant engaged in the activities of your church? (Please check one.)

Enthusiastic, deeply involved Cooperative, usually willing to help

Seldom participates, although attends regularly Attends irregularly, shows little interest

5. In what form of Christian service has the applicant participated regularly?

6. Please indicate what you consider to be the applicant's strengths.

7. Do you know of any weaknesses of which we should be aware?

8. To your knowledge, does the applicant:

Smoke? Yes No Drink? Yes No Use illegal drugs? Yes No

Comments: _____

9. Please describe home factors which might affect the applicant's success at VWMTC _____

10. The applicant's influence on his or her peers is:

Positive Neutral Negative

11. Please evaluate the applicant in regard to the following categories.

(Please circle one.) 1 lowest, 5 highest

Reliability: dependability, responsibility

1 2 3 4 5

Maturity: personal development, ability to cope with life situations

1 2 3 4 5

Emotional stability: reaction to stress, poise, mood stability

1 2 3 4 5

Motivation: genuineness and depth of commitment

1 2 3 4 5

Judgment: ability to analyze a problem

1 2 3 4 5

Oral expression: clarity, coherence

1 2 3 4 5

Interpersonal relations: rapport, cooperation, attitudes toward supervision

1 2 3 4 5

Empathy: sensitivity to the needs of others

1 2 3 4 5

Work habits: stamina, conscientiousness, perseverance, resourcefulness, initiative

1 2 3 4 5

Leadership: creative thought, curiosity, self-confidence

1 2 3 4 5

Personal appearance: cleanliness, grooming

1 2 3 4 5

Integrity: honesty, moral character

1 2 3 4 5

PLEASE CHECK ONE:

- I *highly* recommend
- I recommend
- I recommend *with reservation*
- I *cannot* recommend

PLEASE PRINT OR TYPE THE INFORMATION BELOW:

Name _____

Phone (____) _____

Name of church and

Denomination _____

Address _____

City _____ State _____ Zip _____

Signature _____ Date _____

Please return this form to:
Victory World Missions Training Center
Attn: VWMTC Office
7700 South Lewis Ave
Tulsa, OK 74136
Phone: 918-491-7695

Optional: Please use this space for any additional clarifying comments you may desire to offer:

**Victory World Missions Training Center
PERSONAL RECOMMENDATION FOR ENROLLMENT**

TO THE APPLICANT: Each applicant to VWMTC is required to submit a personal recommendation for review by the Victory World Missions Office. Please complete this entire section. Then give this form to the person (teacher, employer or friend) you choose to have complete it.

Date _____
Phone (_____) _____
Applicant's Name _____
Present Address _____
City _____ State _____ Zip _____
Country _____
Country of Citizenship _____

CONFIDENTIALITY

Under the provisions of the Family Educational Rights and Privacy Act of 1974, registered students and alumnae/alumni have access to their educational records, including letters of recommendation for admission. The Act further provides that applicants may waive that right in order to offer confidentiality to those making a recommendation. Please indicate your decision in this matter and sign.

- I waive my right to review this letter of recommendation.
- I do not waive my right to review this letter of recommendation.

Applicant's Signature _____
Date _____

NOTE: THE ABOVE SECTION MUST BE COMPLETED BY APPLICANT.

TO THE PERSON COMPLETING THIS RECOMMENDATION: The above named individual is applying for admission to Victory World Missions Training Center. Serious consideration will be given to your comments. Thank you for your assistance. Once you have completed the form, please mail it to:

Victory World Missions Office 7700 South Lewis Tulsa, OK 74136

1. How long have you known the applicant? _____ Years or _____ Months
 2. Relationship to the applicant is (may not be a family member):
 High School Teacher/Counselor College Teacher/Counselor Employer Friend
 3. Are you related to the applicant? Yes No If yes, how? _____
 4. How well do you know the applicant?
 Name/Sight Casually Fairly Well Very Close
 5. To your knowledge, has the applicant made a personal commitment to Jesus Christ?
 Yes No I don't know
 6. To your knowledge, does the applicant:
Smoke? Yes No Drink? Yes No Use illegal drugs? Yes No
- Comments: _____

7. Which characteristic(s) best describe the applicant? (check all that apply)

- Warmhearted Critical Tolerant Passive Sympathetic
 Rebellious Respectful Enthusiastic Loving

8. Are you aware of any forms of immoral behavior by the applicant?

9. To your knowledge, what Christian service does the applicant fulfill (such as Sunday school teacher, youth leader, nursery worker)? _____

10. Please indicate what you consider to be the applicant's strengths:

11. Please describe any weaknesses of the applicant of which we should be aware:

12. The applicant's influence on his or her peers is: Positive Neutral Negative

13. Please evaluate the applicant in regard to the following categories. **1-lowest, 5 highest**
(Please circle one number per aspect, and write N/A if no chance to observe)

Christian Commitment: 1 2 3 4 5

Social Adaptability: 1 2 3 4 5

Cooperativeness: 1 2 3 4 5

Integrity and Honesty: 1 2 3 4 5

Responsibility: 1 2 3 4 5

Mental Ability: 1 2 3 4 5

Physical Health: 1 2 3 4 5

Initiative: 1 2 3 4 5

Christian Character: 1 2 3 4 5

Emotional Stability: 1 2 3 4 5

Personal Appearance: 1 2 3 4 5

Leadership: 1 2 3 4 5

Reliability: 1 2 3 4 5

13. Please add further comments which would help in our evaluation. _____

PLEASE CHECK ONE:

I recommend I recommend *with reservation* I do not recommend

PLEASE PRINT OR TYPE THE INFORMATION BELOW:

Name _____

Phone _____

Address _____

City _____ State _____ Zip _____

Name of church and denomination _____

Position in church (if applicable) _____

Signature _____ Date _____

Victory World Missions Training Center STUDENT MEDICAL HISTORY & PHYSICAL EXAMINATION

INSTRUCTIONS: Every applicant is required to complete this medical history form and have a physical examination done before the file is reviewed by the Missions Office.

PART I (To be completed by applicant)

Date _____
Applicant's Name _____
Address _____
City _____ State _____ Zip _____
Country _____
Phone (_____) _____
Country of Citizenship _____
Sex: Male Female
Date of Birth ____/____/____ Age _____
Social Security Number ____-____-____

In case of emergency, please notify:

Name _____
Phone (_____) _____
Address _____

City _____ State _____ Zip _____

Parent or Guardian:

Name: _____
Phone (_____) _____
Address _____
City _____ State _____ Zip _____

Family Physician:

Name _____
Phone (_____) _____
Address _____
City _____ State _____ Zip _____

HISTORY OF DISEASES: Please mark any of the following which apply.

- Asthma Thyroid disturbance Chicken pox Smallpox Hay fever
- Whooping cough Frequent colds Palpitations of heart Measles, German
- Scarlet fever Persistent cough Shortness of breath (Rubella) Diphtheria
- Spitting of blood Swelling of feet Mumps Typhoid fever Night sweats
- Back trouble Tonsillitis Pleurisy Eye trouble Frequent headaches
- Rheumatic fever Malaria Ear trouble Insomnia Diabetes
- Infantile paralysis Nasal obstruction Nervousness Epilepsy/ (polio)
- Fainting or dizzy Frequent urination Convulsions Appendicitis spells
- Joint trouble Stomach ulcer Syphilis Skin trouble Indigestion
- Tuberculosis Gonorrhoea Constipation Other disturbance HIV +/-AIDS
- Measles Other _____

Have you had a skin test for tuberculosis? Yes No

Date administered: _____ Results: Positive Negative

Have you been associated with a tuberculosis patient? Yes No

When? _____

Are you allergic to any antibiotics or other medications? Yes No

If yes, please specify: _____

Are you presently under a medical doctor's care? Yes No

If yes, for what? _____

Are you taking prescription medicines? Yes No

If yes, what? _____

Have you suffered a nervous breakdown? Yes No

If yes, please explain: _____

Have you ever been under a doctor's care for an emotional disorder? Yes No If yes, please explain: _____

What institution? _____

IMMUNIZATION RECORD

DTP

TD or Tetanus

Polio

Rubeola (Measles)

Mumps

Rubella (German Measles)

Health records will be held in strict confidence as with all other materials submitted in application to VWMTTC. The applicant is to sign below that he/she has read this statement and thereby authorizes VWMTTC to release necessary health information in emergency or life-threatening situations. (If applicant is under 18 years, he/she should have his/her parents or guardian co-sign.)

PART II: PHYSICAL EXAMINATION (To be completed by physician)

Height _____ Weight _____

Heart _____

Blood Pressure _____

Nose and throat _____

Sinuses _____

Teeth _____

Skin _____

Eyes _____

Are there any thyroid or glandular difficulties?

Are there any weaknesses or limitations? _____

Do you consider the applicant's health adequate for intensive school work? _ Yes _ No

Remarks:

Please return this form to:
Victory World Missions Training Center
7700 South Lewis Ave
Tulsa, OK 74136

Date _____

Physician's Signature _____

Address _____

City, State & Zip _____