



# HarvestNet Institute

Theological and Leadership Training  
for the Church & the Marketplace

## APPLICATION FOR ADMISSION

*Please Select One of the Following:*

- Master of Christian Ministry Program
- HarvestNet Ministry Certification Program

This application should be filled out by the applicant and mailed or emailed directly to the Registrar at HarvestNet Institute, PO Box 6071, Cleveland, OH 44101 / llaino@windstream.net

1. Legal Name: Mr. \_\_\_\_\_ Name you prefer: \_\_\_\_\_  
Ms. Last First Middle

2. Address: \_\_\_\_\_  
Street & Number City State Zip

3. E-mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

4. Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

5. Birthplace: \_\_\_\_\_ 6. Citizenship (Nationality): \_\_\_\_\_

7. Marital Status:  Single  Married  Divorced  Widowed  
Spouse's Name: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_

Children (Names and Ages) \_\_\_\_\_

8. Do you have any health condition which would limit your ability to pursue active graduate study?  Yes  No  
Are you now, or have you ever been under psychiatric care?  Yes  No

9. Have you ever had extreme financial difficulties, been insolvent, or been bankrupt?  Yes  No

10. Have you ever been refused admittance or re-admittance by any school?  Yes  No  
NOTE: If yes, please explain and attach statement to application.

11. Education Background: (Applicant is responsible for having official transcripts sent directly to the Office of Admission by each school listed in this question.)  
Name of Institution Attendance: From / To Degree / Diploma & Year Received Approximate G.P.A.

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12. Employment or Business Experience (kind and length):  
\_\_\_\_\_  
\_\_\_\_\_

13. Please read the Statement of Faith on the HarvestNet Institute website.  
 Are you in agreement with this statement?  Yes  No  
 Are there areas of disagreement or areas in which you have not formed an opinion?  Yes  No  
 If yes to last question, please state which ones: \_\_\_\_\_
14. When did you trust Jesus Christ as your Savior? \_\_\_\_\_
15. Denominational Preference: \_\_\_\_\_
16. Church Membership: \_\_\_\_\_
17. Ministerial Status:  Under Care  Licensed  Ordained  
 Name of body granting this status and when: \_\_\_\_\_
18. What do you think are your spiritual gifts and why? \_\_\_\_\_  
 \_\_\_\_\_
19. What is your present ministry? (Give position, church or organization, and address.) \_\_\_\_\_  
 \_\_\_\_\_
20. What books or articles have you published? \_\_\_\_\_  
 \_\_\_\_\_
21. Indicate what month and year you plan to begin study: \_\_\_\_\_
22. Essays: On a separate sheet write two essays on the following themes. They must be between 750-800 words each, double-spaced and typed, with 1 inch margins and 12 point font. They will be evaluated for both content and style of writing. Any references are to have footnotes (or endnotes) in a standard style.
- a. Write a comprehensive account of your Christian experience titled *My Christian Experience*: include your testimony of how you became a Christian, how you relate to God, your philosophy of ministry, and your future vocational goals.
  - b. Write a summary of your core theological convictions titled *My Core Theological Convictions*: What is God like (His nature and character), who is Jesus and what did He do; what do you think about the Bible? Use at least 225 words per question and the remainder for an introduction and conclusion.
23. Please enclose a recent photograph, a resume, and a one time, non-refundable application fee of \$50.00 with this form.
24. Please have three letters of reference sent to the Registrar—two personal reference and one pastoral.
- Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_