

APPLICANT'S NAME: (last, first, M.I.)

APPLICANT'S COLLEGE:

ADMISSION APPLICATION FOR: (please check one):

 Belize South Pacific

**Instructions to Applicant:** Complete this application form (please type or print), making sure to include all required information and mail to the address at the bottom.

A \$50 NONREFUNDABLE APPLICATION FEE **must** accompany the application form.

The following must also accompany this application form or be mailed separately: (1) OFFICIAL TRANSCRIPT (2) CCSP FACULTY REFERENCE FORM (3) STUDENT AFFAIRS REFERENCE FORM and (4) CCSP PERSONAL REFERENCE FORM (see attached forms).

*Note: Students from public universities, please substitute CCSP reference forms with three letters of reference: An academic reference from a professor, a personal reference, and a reference from your pastor.*

Applications are considered under a policy of rolling admissions. To be considered for admission the Creation Care Study Program must receive all of the above materials. After submission you will be asked to submit a \$300 nonrefundable deposit to confirm your participation in the program (returned to you during the semester if you attend).

**Enrollment Data:**

Applicant's Full Name

Preferred Name

Address at College

City

State

Zip

Phone Number (with area code)

Cell Phone Number (with area code)

Email Address(es)

Date of Birth

Permanent Mailing Address

City

State

Zip

Permanent Phone Number (with area code)

Church Name

Social Security Number

Church Phone Number (with area code)

