

**APPLICATION**

**Kingdom Life Bible Institute**

*Master's Degree Programs*

Name \_\_\_\_\_

Date of birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Tel. No. \_\_\_\_\_ email \_\_\_\_\_

Place of employment \_\_\_\_\_ Work Telephone \_\_\_\_\_

Please list the school(s) from which you received any prior degree(s):

Name of Institution	Address	Degree	Major	Date degree received

When do you anticipate completing the requirements for your degree? \_\_\_\_\_

Why have you chosen to study at Kingdom Life Bible Institute/Apostolic School of Ministry?

List the names and addresses of two references:

Name	Address
_____	_____
_____	_____

Please have an official transcript from each school sent to:

Dr. Kenneth Meadors  
Kingdom Life Bible Institute  
5 Jones Mill Place  
Cartersville, Georgia 30120

**ACKNOWLEDGEMENT**

I, \_\_\_\_\_, understand that a degree from Kingdom Life Bible Institute/Apostolic School of Ministry does not guarantee a job or ordination in any specific market or ministry and is not specifically designed to meet any particular licensing requirements. Although Transworld Accrediting Commission, International (TAC) accredits this degree, Kingdom Life Bible Institute/Apostolic School of Ministry is not listed with the U. S. Department of Education, and this degree is specifically not suited for people pursuing jobs as public school teachers, state university professors, state-licensed professions, amongst other vocations, and that some states may have restrictions on ways this degree can be utilized in the marketplace.

The primary purposes of this degree are to help strengthen my walk with God and to help in equipping me for Christian ministry, specifically to become a Spirit-anointed teacher.

I am fully aware that this is a Christian ministry, which believes the Bible is the Word of God and that the Bible is the authority upon which my spiritual growth and prayer ministry will be based.

I declare that I am enrolling in Kingdom Life Bible Institute/Apostolic School of Ministry willingly and of my own free will.

**RELEASE**

I, \_\_\_\_\_ in consideration of the ministry to be provided, and being of age of majority, do hereby release Kingdom Life Bible

Institute/Apostolic School of Ministry, its instructors, professors, directors, officers, and representatives from any and all claims, causes of actions, suits, and actions arising out of or in any way connected with the ministry provided by Kingdom Life Bible Institute/Apostolic School of Ministry, its instructors, professors, directors, officers, or representatives. I further agree to indemnify the aforementioned from any and all claims including cost, as a result of any proceeding initiated or commenced whereby any of the aforementioned persons are named to such an extent as the proceedings relate to training provided to myself.

I have read the Acknowledge & Release carefully and have had the opportunity to seek counsel in advance of signing this form.

Your typed name in this application will be acknowledged as your official signature.

Signature of Applicant \_\_\_\_\_

Return to:

Dr. Kenneth Meadors  
Kingdom Life Bible Institute  
5 Jones Mill Place  
Cartersville, Georgia 30120

Please Remit Application Fee                      \$25.00