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"SCHOOL OF TERTIARY EXCELLENCE"

ABN: 92017178183

Implementing Team Impact Christian University Curriculum

Application for Admission to Study Program

Personal Details:

Surname:	
First Names:	
Title:	
DOB:	

Contact Details

Business Hours:	
After Hours:	
Fax:	
Mobile or Cell:	
Email:	
Method of Study:	

Address Details

Physical Address:	Postal Address:
_____	_____
_____	_____
_____	_____
_____	_____

Academic History

Postal Address: PO Box 779, Springwood Qld 4127
Street Address: 13 Watland St, Springwood Qld 4127
Ph: +61 7 38043000 OR Mob: +61 4 14538999
Email: ganuni@globalapostolicnetwork.com.au

APPLICATION (cont.)

Recommendation

Local Pastor:	
Church:	
Best contact:	

Course Application (Please tick course preference)

Certificate in Ministry	

Diploma in Ministry	

Bachelor Degree in Theology	
Bachelor Degree in Ministry	
Bachelor Degree in Prophetic Ministry	
Bachelor Degree in Christian Counselling	
Bachelor Degree in Christian Education	
Bachelor Degree in Christian Entrepreneurship	

Master's Degree in Theology	
Master's Degree in Ministry	
Master's Degree in Prophetic Ministry	
Master's Degree in Christian Counselling	
Master's Degree in Christian Education	
Master's Degree in Christian Entrepreneurship	
Master's Degree in Christian Leadership	

Doctor of Ministry Degree	
Doctor of Divinity Degree (Honorary)	

I, the undersigned applicant, declare that the information supplied is true and accurate and bind myself to pay in full all fees due. My signature witnesses that I am in agreement with all the terms and conditions of Global Apostolic School of Tertiary Excellence, and will abide by said terms and conditions as described.

Signature	Date

Please attach certified copies of ID as well as relevant academic qualifications.

Office Use Only

Approved:	
Date:	
Student Number:	

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