



Deeper Life International Bible Training College

Private Mail Bag, Brofoyedru – Kumasi

Affiliated to Anchor University, Lagos – Nigeria

APPLICATION FOR ADMISSION

Programme:

Certificate in Theology

Application Type:

Executive Certificate (7 months)

Session

Distance Online Only

Personal Information

Full Name: _____ Age: _____ Gender: _____
(Surname) (Other Names)

Active WhatsApp Contact: _____ Email: _____

Phone Contact: _____ Residence: _____

Employment Information

Year		Employer	Type of work	Position or Rank
From	To			

Financial Information

If admitted, who will finance your studies? Please tick (✓)

Self: Church: Other: (Specify) _____

Academic Information

List in a chronological order all Post-Secondary institutions attended (*highest qualification should be first*).

S/N	Name of Institution	Year of Completion	Qualification Obtained
1			
2			
3			

Affix one endorsed
passport sized
photograph here

Ministerial Information:

Church Affiliation: _____

Designation: _____ No. of Years in Ministry: _____

Lecture Delivery Mode Preparedness:

Please since the programme would be carried out on a virtual means, kindly indicate:

1. The device you will be using for lectures:

Laptop Desktop Smart Phone/Tablet Others (specify): _____

2. The source of your internet connectivity:

Phone hotspot Mifi / Wifi device Others (specify): _____

Previous Theological Training:

Have you undergone any theological training anywhere? Yes No

If yes state **where** and **when**:

APPLICANT'S DECLARATION:

I _____ declare that all information provided is accurate to the best of my knowledge. I also certify that all attached documents are valid and pertain to me.

Full name of applicant

I agree that if any information provided is found to be untrue or altered, the Deeper Life International Bible Training College has the right to deny me admission or dismiss me from the College at any time.

Signature of Applicant: _____ Date: _____

GUARANTOR'S DECLARATION (must be your superior):

I _____ declare all information provided by the applicant is true to the best of my knowledge. I also certify that all attached documents are valid.

Full name of guarantor

Designation of Guarantor: _____ Signature: _____

Date: _____

NB: Return the completed Application Form and all relevant documents (copies of certificates, etc.) to:

registry@dlibtc.edu.gh