Ministry Training Institute Student Application - Single Course

STEPS TO APPLY

Complete MTI application

Submit to admin@mtiprogram.com*

PERSONAL INFORMATION

NAME

MAILING ADDRESS   CITY/TOWN   STATE   ZIP

EMAIL   DATE OF BIRTH   PHONE   MARITAL STATUS

COURSE IN WHICH YOU INTEND TO ENROLL _____

REASON FOR ENROLLMENT   ☐ Fulfillment of Licensure/Ordination Requirements   ☐ Continuing Ed. Requirement
☐ Other (Please List): _____

PLEASE AFFIRM

☐ I hereby certify that the information presented is correct to the best of my ability. I hereby authorize the staff of MTI to contact my references for addtional information as it pertains to my application for admission.

☐ I have read, understood and affirm MTI's Statement of Faith found at mtiprogram.com/about

Signature   Date

SUBMIT TO

admin@mtiprogram.com or
PO Box 690848, Charlotte, NC 28227

The Ministry Training Institute (MTI) does not discriminate based on race, sex, color or national origin.