



GRM Equipping Center

P.O. Box 8212  
Turnersville NJ 08012  
Phone: 856-371-0354

www.gloryrealmministries.com

\$25 Application Fee \_\_\_\_\_  
Cash or Check \_\_\_\_\_  
Date \_\_\_\_\_

**APPLICATION FOR ADMISSION**

*Please type or print*

Today's Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Desired Start Date \_\_\_\_\_  
Quarter Year

**PHOTOGRAPH**  
Application not complete without photo

**PERSONAL**

1 Full Name \_\_\_\_\_  
0 First Middle Last

1  
2 Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender (please circle) Female Male  
0 Month Day Year

3 Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email (required) \_\_\_\_\_

4 Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

5 Have you ever been convicted of a criminal offense (circle yes or no)? Yes No  
If yes, please explain:  
\_\_\_\_\_

6 Are there any legal actions or judgments pending against you currently (circle yes or no)? Yes No  
If yes, please explain:  
\_\_\_\_\_

7 Marital Status:  
Single/ Married /Date of Marriage \_\_\_\_\_  
Spouse's Name \_\_\_\_\_  
Widowed/ Divorced/ Remarried \_\_\_\_\_

8 Number of children at home \_\_\_\_\_ Ages \_\_\_\_\_

9 When did you become a Christian (approximate if you are not sure)? \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month Day Year

10 What is the name, address, and phone number of your local church?  
Name \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

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

11 If you are not a member of The Glory Center, who is your pastor and/or coordinator?

Name \_\_\_\_\_ Phone Number (\_\_\_\_\_) \_\_\_\_\_

12 Are you on staff at your local church? Yes No If yes, position \_\_\_\_\_

13 Are you currently involved in a church affiliated small group? Yes No

If so, briefly describe the group and give the leader's name? \_\_\_\_\_  
\_\_\_\_\_

14 How did you hear about GRM? (please circle)

Brochure/Catalog Conference Friend Pastor Church Service Web Other \_\_\_\_\_

### EDUCATION AND EXPERIENCE INFORMATION

15 Are you a high school graduate or do you have a GED equivalent? Yes No Date Graduated \_\_\_\_\_

16 Post High School Education or College(s) Attended	Dates Attended	Major or Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

17 In your educational experiences, have you completed coursework in biblical, theological, or other areas of ministry at a university level? Yes No

18 Employment History (put most recent job first)

Employer	Position	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

19 What experience do you have in serving and leading?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20 At present, what are your ministry objectives? (List 1, 2, and 3 in your order of preference)

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Pastoral Ministry      | <input type="checkbox"/> Young Children Ministry | <input type="checkbox"/> Elderly Ministry     | <input type="checkbox"/> Missionary            |
| <input type="checkbox"/> Elementary Ministry    | <input type="checkbox"/> Homeless Ministry       | <input type="checkbox"/> Compassion Ministry  | <input type="checkbox"/> Church Planter        |
| <input type="checkbox"/> Middle School Ministry | <input type="checkbox"/> Counseling              | <input type="checkbox"/> High School Ministry | <input type="checkbox"/> Lay Christian Service |
| <input type="checkbox"/> College Ministry       | <input type="checkbox"/> Evangelism              | <input type="checkbox"/> Young Adult Ministry | <input type="checkbox"/> Prison Ministry       |
| <input type="checkbox"/> Worship Ministry       | <input type="checkbox"/> Men's/Women's Ministry  | <input type="checkbox"/> Marriage and Family  | <input type="checkbox"/> Other _____           |

21 What are your areas of gifting (Please circle all that apply)

Administration	Giving	Prophecy	Discernment	Healing
Serving	Counseling	Hospitality	Teaching	Encouragement
Leading	Worship	Evangelism	Mercy	Faith
Pastor	Other _____			

22 Please answer the following two topics on a separate piece of paper (up to 150 words each):

- 1) Give an account of your conversion to Christ or the nature of your Christian experience (your testimony).
- 2) Discuss what you know about God's calling in your life, your vision of the future, and how GRM would assist in that.

23 Please read the statement of faith and values in our catalog or from our website. Do you agree with the statement?

Yes    No    If no, explain. \_\_\_\_\_

The above information I have included on this application is accurate to the best of my knowledge. I understand that any fabrication is grounds for dismissal. I also understand that my academic and financial records, in regard to GRM, may be made available to my pastor and/or site coordinator.

I have also read the GRM Tuition information in the Catalog or Website and understand that tuition will be paid in full by the first day of each quarter, and I have included the \$25 non-refundable application fee.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

# REFERENCE FORM

Instructions: Complete Section I and then have your pastor, youth pastor, ministry leader, or small group leader, who knows your testimony and who has observed your spiritual growth, complete Section II. This should be someone who knows you, but is not a family member.

I. To be completed by the applicant (please print)

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Waiver of right of access to confidential statement: I, the undersigned, hereby voluntarily waive any right to inspect the content of this recommendation.

Applicant's Signature \_\_\_\_\_

II. To be completed by the pastor/youth pastor/ministry leader/small group leader. (please print)

GRM requires the applicant to have the maturity, character, and integrity of a leader in the ministry of the kingdom of God. GRM is looking for the called and committed leader to be further trained as the leader God has called him or her to be. As an applicant the student above is required to submit a recommendation from either his/her pastor, youth pastor, ministry leader, or small group leader. Your comments are important to us. Therefore, please provide your honest, complete and careful evaluation.

Please return this completed form promptly to:

**GRM Equipping Center**

P.O. Box 8212

Turnersville NJ 08012

For more information, please call # 856-371-0354

1 How long have you known the applicant? \_\_\_\_\_

2 How well do you know the applicant (please circle one of the following):

Close personal relationship

Fairly well

Casually

By name only

3 Does the applicant profess to be saved/born again (please circle one of the following)? Yes No I don't know

4 Do you observe evidence to support this profession (please circle one of the following)? Yes No I don't know

5 Is the applicant living a consistent Christian Life (please circle one of the following)? Yes No I don't know

What evidence have you observed? \_\_\_\_\_

\_\_\_\_\_

6 What spiritual gifts are evident in the applicant's life? \_\_\_\_\_

\_\_\_\_\_

7 Describe the type of ministry you have observed the applicant performing: \_\_\_\_\_

\_\_\_\_\_

8 Describe the applicant's pattern of service in ministry. He/She serves in ministry (please circle one of the following):

Regularly (weekly)

Occasionally (2x/mo. or so)

Sporadically (1 time/mo. or less)

9 Describe briefly the applicant's home situation. \_\_\_\_\_  
\_\_\_\_\_

10 Are you aware if the applicant has been investigated for or accused of sexual or physical abuse (please circle one of the following)?

Yes    No    I don't know    If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

11 Are you aware of the applicant being charged or convicted of any criminal offense (please circle one of the following)?

Yes    No    I don't know    If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

12 Through your observation of the applicant or through your hearing of his/her testimony, is it evident that the applicant has experienced outstanding change and growth when he/she committed his/her life to Christ (please circle one of the following)?

Yes    No    I don't know    If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

13 Is the applicant's reputation above reproach and consistent with biblical teaching (please circle one of the following)?

Yes    No    I don't know    If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

14 If the applicant is single, how would you describe his/her dating practices (please circle one of the following)?

Consistent with biblical teaching    Have not observed    Questionable    Definite problem-Please explain: \_\_\_\_\_  
\_\_\_\_\_

15 If married, how would you describe the applicant's relationship with his/her spouse (please circle one of the following)?

Healthy and Mature    Reasonable but with unresolved issues    Definite problem-Please explain: \_\_\_\_\_  
\_\_\_\_\_

16 How would you describe the applicant's attitude toward authority (please circle one of the following)?

Consistent with biblical teaching    Have not observed    Questionable

Please Explain \_\_\_\_\_  
\_\_\_\_\_

17 In social relationships with peers, the applicant is (please circle one of the following):

Sought out    Accepted    Tolerated

Comments: \_\_\_\_\_  
\_\_\_\_\_

18 In handling finances, would you say the applicant's practices are (please circle one of the following):

Consistent with biblical teaching    Have not observed    Questionable

Please explain: \_\_\_\_\_  
\_\_\_\_\_

19 Which of the following present the greatest challenge to the applicant: The applicant's spirituality, cooperativeness, honesty, tactfulness, good judgment, willingness to do hard work?

Please explain: \_\_\_\_\_  
\_\_\_\_\_

**Recommendation concerning acceptance:**

GRM requires the applicant to have the maturity, character, and integrity of a kingdom leader. GRM is looking for the called and committed leader for the kingdom to be further trained as the leader God has called him or her to be. If you were the Director of Vineyard Leadership Institute with the mandate to train students for full-time Christian leadership, knowing what you do about the applicant, would you think it wise to accept this student (please circle one of the following)?

Yes, enthusiastically                      Yes, with reservations (please explain below)                      No (please explain below)

**I would like to discuss this recommendation by phone (optional).                      Yes                      No**

Phone number: (\_\_\_\_\_)\_\_\_\_\_

Name (please print)\_\_\_\_\_ Title\_\_\_\_\_

Church\_\_\_\_\_ Address\_\_\_\_\_

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

Home Phone(\_\_\_\_\_)\_\_\_\_\_ Work Phone(\_\_\_\_\_)\_\_\_\_\_

Email Address\_\_\_\_\_

Signature\_\_\_\_\_ Date\_\_\_\_\_

*Thank you for your time.  
We value your help in partnering with us to train and raise up leaders of integrity for the kingdom of God.  
The staff at GRM*

Explanation for Yes, with reservations or No: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_