TRANSFORMATIONAL BIBLICAL EDUCATION

Distance Education

Application for Admission





Distance Education Application Check-List

1. Documents Required for All Students (모든 지원자 해당 서류) 1) WMU Forms □ 1 Application / 입학원서 1부 □ 1 Testimony / 신앙고백서 1부 □ 1 Reference / 봉인된 추천서 1부 2) Non-WMU Forms □ 1 Official Transcript (sealed in envelope) / 봉인된 성적 증명서 1부 (영문) □ 2 Passport Size Photos (Size: 2 in x 2 in) / 여권용 사진 2매 2. Fees (제반 비용) Application Fee \$100 (All Students, Non-refundable) / 원서 접수비 (모든 지원자에게 해당, 환불 안됨) 3. Payment Method (지불 방법) Credit Cards (Visa, Master, Discover, American Express, JCB, Union Pay, Diners Club, BC Global Card) / 크레딧 카드 □ Check (Make all checks payable to World Mission University) /수표 ☐ Cash / 현금

Signature:

I certify that the information I have provided throughout this application is complete and correct.



Please check the appropriate box for the program you are applying for. (지원하는 해당 항목에 표시해 주십시오.) 1. Associate of Arts Degree Program (준학사과정) PHOTO A.A. in Biblical Studies (성서학) □ A.A. in Christian Counseling (기독교 상담학) 2 in x 2 in (51 mm x 51 mm) 2. Bachelor of Arts Degree Program (학사과정) □ B.A. in Biblical Studies (성서학) ■ B.A. in Christian Counseling (기독교 상담학) ■ B.A. in Music (음악학) 3. Master's Degree Program (석사과정) Office Use Only ■ Master of Divinity (목회학) Student ID # M.A. in Theology (신학) **□ I-20** □ F/A DE M.A. in Christian Counseling (기독교 상담학) ■ Audit Visiting 4. Doctoral Degree Program (박사과정) \square C \square N \square R \square T \square TC Doctor of Ministry (목회학) e-mail: 5. Term/ Semester (지원하는 학기와 연도를 표시해 주십시오.) *Year: Advisor: ☐ Fall Semester ☐ Spring Semester ☐ Winter Term ☐ Summer Term Personal Information (인적사항) 6. Full Legal Name (영어 성명): 7. Name in Korean (한글 성명): 8. Gender (성별): Male Female 9. Address (주소): 10. Phone Number (전화번호): 11. e-mail Address (이메일): 12. Date of Birth (생년월일): 13. Citizenship: U.S. Citizen U.S. Permanent Resident 14. Social Security Number: 15. Are you an international student? Yes ■ No If yes, Country of Citizenship: Family Information (가족사항) 16. Marital Status (결혼여부): Single Married Other: 17. If Married, Name of Spouse (배우자 성명): Date of Birth 18. Name of a Child: Date of Birth Name of a Child: Date of Birth Name of a Child: Date of Birth

Date of Birth

Name of a Child:



| | Emergency Contact (비상 연락처) | | | | | | | | |
|-----|--|----------------------|----------------|--------------------------------|---------|--|--|--|--|
| 19. | Name: | | | Relationship: | | | | | |
| | Phone Number: Home | | Last | | | | | | |
| | ноте | work | | Mobile | | | | | |
| | Do you have health insurance? (건 | !강 보험) □ Yes | ☐ No (If yes, | provide insurance information. | .) | | | | |
| 20. | Insurance Company: | | Policy Number: | | | | | | |
| | Church Information (출석 교회 사항 |) | | | | | | | |
| 21. | Church Name: | Name: Year Attended: | | | | | | | |
| | Address (주소): | City | State | Zip Country | | | | | |
| | Phone Number (HAIHA) | City | | Mobile | | | | | |
| | Name of the Senior Pastor: | | | ntion (교단): | | | | | |
| | Are you baptized? (세례 여부) | Yes (If yes, Date: |) | □ No | | | | | |
| | | | | | | | | | |
| | Position at Church (교회 직분) | | | | | | | | |
| 21. | Senior Pastor (담임 목사) _ Associate Pastor (부목사) _ EM Pastor (영어 목회 목사) _ Youth Pastor (청소년 목회 | | | | | | | | |
| | □ Intern Pastor (전도사) □ Past □ Ordained Deacon/Deaconess (안수집 | | | | sa (권사) | | | | |
| | Ministry / Volunteer Information (사역/봉사 현황) | | | | | | | | |
| | | | | | | | | | |
| 23. | Church Name: | | | | | | | | |
| | Briefly describe your ministry: | | | | | | | | |
| | Church Name: Period: | | | | | | | | |
| | Briefly describe your ministry: | | | | | | | | |
| | Education History (학력사항: 최종 학력을 먼저 기입하십시오.) | | | | | | | | |
| 24. | School Name: | | Location | : | | | | | |
| | Year Entered: | Year of Graduation: | Diploma, | /Degree Received: | | | | | |
| | School Name: | | Location | : | | | | | |
| | Year Entered: | Year of Graduation: | Diploma, | /Degree Received: | | | | | |
| | School Name: | | Location | : | | | | | |
| | Year Entered: | Year of Graduation: | Diploma, | /Degree Received: | | | | | |



| Please check the appropriate box for the method of interview. (인터뷰 방법에 표시하십시오.) | | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| ☐ I plan to attend the face to face interview on campus on a scheduled date. | | | | | | | | |
| (The program director will schedule an appointment for interview.) | | | | | | | | |
| ☐ I would like to have a phone interview.* | | | | | | | | |
| (Phone number: , Available date and time: | | | | | | | | |
| * 전화면접은 해외거주, 타주, 또는 LA County 이외 지역에 해당되며, LA 현지시간 기준으로 3:00 pm ~ 6:00 pm에만 면접 가능. | | | | | | | | |
| Please briefly describe the purpose of the study that you desire to achieve through the program. (본 과정을 통해 성취하고자 하는 목적을 간략하게 적어 주십시오.) | | | | | | | | |
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| Please list questions that you have most concerned about applying for the program. (본 과정을 지원하면서 가장 알고 싶은 질문이 있으시면 적어 주십시오.) | | | | | | | | |
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| If necessary, attach a separate sheet of paper for any additional information. | | | | | | | | |
| I certify that the information I have provided throughout this application is complete and correct. | | | | | | | | |
| Signature: Date: | | | | | | | | |
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| | | | | | | | | |
| OFFICIAL USE ONLY | | | | | | | | |
| ☐ Accepted ☐ Conditionally Accepted ☐ Not Accepted | | | | | | | | |
| Faculty Signature: Date: | | | | | | | | |
| Faculty Signature: Date: | | | | | | | | |



* BAM or MAM Applicant Only (아래 사항은 음악학 학사 혹은 석사 지원자에게만 해당됩니다) Please check the appropriate box for the method of audition. (오디션 방법에 표시하십시오.) I am sending my recent audition tape. I plan to attend the audition on campus on the scheduled date. Please list the names of instructors you have studied with. (이 전에 사사한 선생님의 성함을 적어 주십시오.) Name: Name of School: School Location: Years of Attendance: * MACC Applicant Only (아래 사항은 기독교 상담학 석사 지원자에게만 해당됩니다) Please check if you have taken any of following prerequisite courses. Check all if applicable. (아래 선행과목들 중 본인이 이미 수강한 과목은 모두 표시해 주십시오) ☐ Introduction to Psychology ☐ Life-span Development Please list courses taken that are similar to the courses listed above. (수강한 과목이 위에 나열된 선행과목과 내용이 유사한 경우 그 과목의 제목(들)을 기록해 주십시오) * Please note that you need to provide undergraduate transcript for evidence. If you record similar course(s) intead of the listed titles, decision will be made by the director of MACC after consideration. (선행과목 이수 여부에 대한 결정을 위해서는 학부 성적표가 요구되며, 제목이 다를 경우 MACC 디렉터에 의해 이수 및 수강여부가 결정된다.) If you need to take any course(s) among listed above, please indicate when you plan to do so. (위에 나열된 과목들 중 하나라도 이수해야 한다면, 언제 이수할 것인지를 표시해 주십시오) ☐ Fall/20 ☐ Spring/20 ☐ Winter/20 ☐ Summer/20 2nd semester: If necessary, attach a separate sheet of paper for any additional information. I certify that the information I have provided throughout this application is complete and correct. Signature: OFFICIAL USE ONLY ☐ Accepted ☐ Conditionally Accepted Not Accepted Faculty Signature: Date:



Distance Education Testimony

If necessary, attach a separate sheet of paper for any additional information. 1. Please briefly describe how you met Jesus. (예수님을 영접하게 된 계기를 적으시오.) 2. How has your life changed as a result of meeting Jesus? (예수님을 영접한 이후, 일어난 삶의 변화를 적으시오.) 3. Why do you want to come to World Mission University? (월드미션대학교에 지원한 동기를 적으시오.) 4. What are your ministry goals or future plans after graduation? (졸업 후, 사역 계획이나 진로 계획에 대해 적으시오.)



Distance Education Reference

<지원자 작성부분> 지원자 작성부분을 먼저 작성하고, 추천인 작성부분을 받으시오.

To the applicant: Please read the following instruction carefully.

Fill out the top portion of your information on this reference. Reference must be submitted as sealed in return envelope.

| 1. Name of Applicant (지원자 성명): | | | | | | | | | | | |
|---|--|----------------------------|---------------|-------------|---------------|--|--|--|--|--|--|
| | Dua mana wa wa a a a a la in | First | | Middle | Last | | | | | | |
| Program you are applying for (지원학과): | | | | | | | | | | | |
| | Term/Semester (지원하는 학기와 연도를 표시해 주십시오.) | | | | | | | | | | |
| | ☐ Fall Semester | ☐ Spring Semester | ☐ Winter Term | Summer Term | Year: | | | | | | |
| 2. | ☐ Pastoral Reference | es | | | | | | | | | |
| 3. I understand this letter of evaluation is to be received and maintained in confidence by the World Mission University, for admission consideration. I hereby expressly waive any and all rights I might have of access to this evaluation under the Family Education Rights and Privacy Act of 1974, the California Information Practices Act of 1977, and any/or all other laws, regulations or policies. I understand that the rights I am waving include, but are not limited to, the right to inspect and review this letter; the right to have any copy of this letter made for my use; the right to request an amendment of this letter. | | | | | | | | | | | |
| | ☐ I agree to waive access to this reference form. | | | | | | | | | | |
| | \square I do not agree to v | waive access to this refer | ence form. | | | | | | | | |
| | | Applicant's Sig | nature: | | Date: | | | | | | |
| <추천인 작성부분> To the recommender: Please read the following instruction carefully. Answer all questions thoroughly and honestly. Seal this reference in the envelope provided. You may send it directly to World Mission University or give it to the applicant. | | | | | | | | | | | |
| 4. | Name of Recommender: | | | | | | | | | | |
| | Position / Title: | First | Last | | Date of Birth | | | | | | |
| | Name of Institution (chui | rch, etc.): | | | | | | | | | |
| | Phone Number: | | e-mail: | | | | | | | | |
| | Are you WMU alumnus? | ☐ Yes (Year of Grad | luation:) | □ No | | | | | | | |
| 5. | 5. What's your relationship to the applicant? (친인척 관계는 추천자가 될 수 없습니다.) | | | | | | | | | | |
| 6. | How long have you know | vn the applicant? | Year(s) | Month(s) | | | | | | | |
| 7. | How well do you know t | he applicant? 🔲 Casu | ıally 🔲 Well | ☐ Very well | | | | | | | |
| 8. | 3. To your knowledge, has the applicant made a personal commitment to Jesus Christ? (지원자가 예수 그리스도께 헌신되어 있다고 봅니까?) | | | | | | | | | | |
| | - | No 🗆 Don't | Know | | | | | | | | |



Distance Education Reference

Reference Continued 9. How does the applicant demonstrate a commitment to Christ in his/her lifestyle? (지원의 삶 속에서 예수 그리스도에 헌신되어 있다는 것을 어떻게 나타내 보입니까?) 10. Check the following qualities that apply to the applicant. Poor **Below Average** Above Average Excellent Average 미달 보통 이하 보통 보통 이상 탁월 • Spiritual Maturity (영적 성숙) • Leadership Qualities (지도력) П П П П Responsibility and Initiative (책임감과 솔선수범) Cooperation and Teamwork (협동심) • Emotional Stability (감정 조절) П П П Communication (의사 소통) • Personal Demeanor (품행) • Church Involvement (교회 / 사역 참여) П П П П П 11. Are there any circumstances relating to this applicant that the University should know before deciding upon his/her admission? (입학여부를 결정하기에 앞서, 본교가 반드시 알아야 할 지원자와 관련된 상황이 있으면 설명해 주십시오.) If necessary, attach a separate sheet of paper for any additional information. I recomend this applicant for admission to World Mission University

 with enthusiasm (적극적으로 추천) with reservation (망설여짐) □ with some confidence (추천함) □ I don't recommend admission (추천하지 않음) I certify that the information I have provided throughout this application is complete and correct. Signature: Date: For questions, please contact the admissions office. | (213)388-1000 | www.wmu.edu | admissions@wmu.edu WMU_Application_DE_9