#### TRANSFORMATIONAL BIBLICAL EDUCATION

# **Doctor of Church Music**

**Application for Admission** 





### **DCM Application Check-List**

### 1. Documents Required for All Students (모든 지원자 해당 서류) 1) WMU Forms □ 1 Application / 입학원서 1부 □ 1 Testimony / 신앙고백서 1부 □ 2 References (sealed in envelope) / 봉인된 추천서 2부 2) Non-WMU Forms □ 1 Official Transcript (sealed in envelope) / 봉인된 학사 성적증명서 1부 (영문) □ 1 Official Transcript (sealed in envelope) / 봉인된 석사 성적증명서 1부 (영문) 2 Passport Size Photos (Size: 2in x 2in) / 여권용 사진 2매 □ 1 Copy of Current Resume / 이력서 1부 (연주경력 소개서) 2. Documents Required for International Students (F-1) ONLY (유학생 지원자 해당 서류) □ I-20 Request / I-20 신청서 (WMU Form) □ Agreement of Financial Support / 재정 보증서 (WMU Form) ■ Bank Statement / 은행 예금잔고 증명서 (영문) Passport Copy / 여권 복사본 □ Visa Copy / 비자 복사본 □ I-20 Copy / I-20 복사본 □ I-94 Copy / I-94 복사본 3. Fees (제반 비용) □ Application Fee \$100 (All Students, Non-refundable) / 원서 접수비 (모든 지원자에게 해당, 환불 안됨) □ International Student Service Fee \$300 (Non-refundable) / 해외 유학생 및 전입학생을 위한 서비스 (환불 안됨) □ Express Mail Fee \$50/\$70 (International Students Only, Non-refundable) / 특급 우편비 (해외 유학생의 경우, 환불 안됨) 4. Payment Method(지불 방법) Credit Cards (Visa, Master, Discover, American Express, JCB, Union Pay, Diners Club, BC Global Card) / 크레딧 카드 (3% 카드 수수료 본인 부담) □ Check (Make all checks payable to World Mission University) / 수표 ☐ Cash / 현금

For international students: At WMU, an international student is an individual of foreign nationality who will be entering the United States with a student visa. You must report to WMU your arrival to the U.S. and submit photocopies of F-1 visa and I-94.

For transfer students: At WMU, a transfer student is an individual of foreign nationality who has already entered the United States with a student visa and has been studying at another institution.



**PHOTO** 

Please check the appropriate box for the program you are applying for. (지원하는 해당 항목에 표시해 주십시오.) 1. Doctor of Church Music

☐ Campus ☐ Online		
2. Term / Semester (지원하는 학기와 연도를 표시해 주십시오.	) *Year:	2 in x 2 in
☐ Fall Semester ☐ Spring Semester ☐ Winter	<u> </u>	(51mm x 51mm)
		Office Use Only Student ID #
		☐ Audit ☐ Visiting
		□C □N □R □T □TC
		e-mail:@wmu.edu
		Advisor:
Personal Information (인적사항)		
3. Full Legal Name (영어 성명):	Middle	Last
4. Name in Korean (한글 성명):		
6. Address (주소):	State	Zip Country
7. Phone Number (전화번호):	Work	Mobile
8. e-mail Address (이메일):		/ /
10. Citizenship: 🗌 U.S. Citizen 🗎 U.S. Permanent	Resident Others:	Month Day Year
11. Social Security Number:		
12. Are you an international student?   Yes   No	o If yes, Country of Citizenship:	
Family Information (가족사항)		
13. Marital Status (결혼여부): 🗌 Single	☐ Married ☐ Other:	
14. If Married, Name of Spouse (배우자 성명):	st Last	Date of Birth
15. Name of a Child:		
Name of a Child:  First  First		Date of Birth  Date of Birth
Name of a Child:		
Name of a Child:		Date of Birth
First	Last [	Date of Birth



16. Emergency Contact (비상 연락처)			
Name:First	Middlo	Relationship:	
Phone Number	Work	Mobile	
поше	WOIK	моне	
17. Do you have health insurance? (?	<b>ᅼ강 보험)</b> □ Yes	☐ No (If yes, provide insurance inform	nation.)
Insurance Company:		Policy Number:	
18. Church Information (출석 교회 사형	+)		
Church Name:		Year Attended:	
Address (주소):street			
			ountry
Name of the Senior Pastor:			
19. Are you baptized? (세례 여부)	Yes (If yes, Date:	)	
20. Position at Church			
	U사) 🗌 Deacon/Deacone	Missionary (선교사) □ Elder (장로) sss (서리 집사) □ Laity (평신도) □ Othe	
		Poriod:	
Church Name:			
Briefly describe your ministry:			
Church Name:		Period:	
Briefly describe your ministry:			
22. Education History (학력사항: 최종 및	학력을 먼저 기입하십시오.)		
			_
School Name:		Location:	
School Name:Year Entered:			
Year Entered:		Diploma/Degree Received:	
Year Entered: School Name:	Year of Graduation:	Diploma/Degree Received:	
Year Entered:  School Name:  Year Entered:	Year of Graduation:	Diploma/Degree Received:  Location:  Diploma/Degree Received:	



#### Please check the appropriate box for the method of interview. (인터뷰 방법에 표시하십시오.)

$\square$ 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 3:00pm ~ 6:00pm에만 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.)
Please list questions that you have most concerned about applying for the program. (본 과정을 지원하면서 가장 알고 싶은 질문이 있으시면 적어 주십시오.)



	There are three steps for the audition. (3단계의	오디션 과정) 		
1)	Submit audition CD 2) Attend live	e audition	3) Intervi	ew
	Please list the names of instructors you have st	udied with. (이전에 사시	ŀ한 선생님의 성'	함을 적어 주십시오.)
1)	Name:	Name of School:		
	School Location:	Years of Study:		
2)	Name:	Name of School:		
	School Location:	Years of Study:		
	If necessary, attach a separate sheet of paper fo	or any additional infor	mation	
	in necessary, actually a separate sheet of paper to	or any additional infor		
	I certify that the information I have provided th	roughout this applicat	ion is complet	e and correct.
	Signature:		Date:	
	OFFICIAL USE ONLY			
	☐ Accepted ☐ Co	nditionally Accepted		☐ Not Accepted
	Faculty Signature:		Date:	



### **DCM 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.)



### **DCM Pastoral 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):		
	First Program you are applying for (지원학과):	Middle	Last
	Term / Semester (지원하는 학기와 연도를 표시해 주십시오.)		
	☐ Fall Semester ☐ Spring Semester ☐ Winter Te	erm Summer Term	*Year:
2.	. Two References		
	☐ Pastoral Reference ☐ Academic Reference		
3.	. I understand this letter of evaluation is to be received and m admission consideration. I hereby expressly waive any and all ri Education Rights and Privacy Act of 1974, the California Informat or policies, I understand that the rights i am waving include, bu the right to have any copy of this letter made for my use; the rig	ghts I might have of access ion Practices Act of 1977, a t are not limited to, the rig	to this evaluation under the Family nd any/or all other laws, regulations ht to inspect and review this letter;
	<ul> <li>I agree to waive access to this reference form.</li> </ul>		
	<ul> <li>I do not agree to waive access to this reference form.</li> </ul>		
	Applicant's Signature:		Date:
	〈추천인 작성부분〉 To the recommender: Please read the Answer all questions thoroughly and honestly. Seal this refere Mission University or give it to the applicant.		
4.	. Name of Recommender:		
٦.	First	Last	Date of Birth
	Position / Title:		
	Phone Number: e	-mail:	
	Are you WMU alumnus?	)	
5.	. What's your relationship to the applicant? (친인척 관계는 추천자기	물 수 없습니다.)	
6.	. How long have you known the applicant? Year(s	) Month(s	)
7.	. How well do you know the applicant?	☐ Well ☐ Very We	II
8.	. To your Knowledge, has the applicant made a personal commitr (지원자가 예수 그리스도께 헌신되어 있다고 봅니까?)	nent to Jesus Christ?	



### **DCM Pastoral Reference**

#### **Reference Continued** 9. How does the applicant demonstrate a commitment to Christ in his/ her lifestyle? (지원자 삶 속에서 예수 그리스도에 헌신되어있다는 것을 어떻게 나타내 보입니까?) 10. Check the following qualities that apply to the applicant. Poor Below Average Above Average Excellent Average 미달 보통이하 보통 보통이상 탁월 • Spiritual Maturity (영적 성숙) • Leadership Qualities (지도력) Responsibility and Initiative (책임감과 솔선수범) Cooperation and Teamwork (협동심) • Emotional Stability (감정조절) Communication (의사소통) Personal Demeanor (품행) Church Involvement (교회/ 사역참여) 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 recommend this applicant for admission to World Mission University ■ with enthusiasm (적극적으로 추천) ■ with reservation (망설여짐) □ I don't recommend admission (추천하지 않음) ■ with some confidence (추천함) I certify that the information I have provided throughout this application is complete and correct.

Date:

Signature:



### **DCM Academic 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.	ame of Applicant (지원자 성명):  First Middle Last
	rogram you are applying for (지원학과):
	erm / Semester (지원하는 학기와 연도를 표시해 주십시오.)
2.	vo References
	☐ Pastoral Reference ☐ Academic Reference
3.	understand this letter of evaluation is to be received and maintained in confidence by the World Mission University, for dmission consideration. I hereby expressly waive any and all rights I might have of access to this evaluation under the Family ducation Rights and Privacy Act of 1974, the California Information Practices Act of 1977, and any/or all other laws, regulations r policies, I understand that the rights i am waving include, but are not limited to, the right to inspect and review this letter; ne 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.
	☐ I do not agree to waive access to this reference form.
	Applicant's Signature: Date:
	수천인 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.
_	ame of Decommender.
4.	Ame of Recommender:  First Last Date of Birth
	osition / Title:
	ame of Institution (Church, etc.):
	hone Number: e-mail:
	re you WMU alumnus?
5.	/hat's your relationship to the applicant? (친인척 관계는 추천자가 될 수 없습니다.)
6.	ow long have you known the applicant? Year(s) Month(s)
7.	ow well do you know the applicant?   Casually   Well   Very Well
8.	o your Knowledge, has the applicant made a personal commitment to Jesus Christ? 지원자가 예수 그리스도께 헌신되어 있다고 봅니까?)
	☐ Yes ☐ No ☐ Don't Know



### **DCM Academic Reference**

#### **Reference Continued**

9.	Please rate this applical ability and talent. Pleas						of the applicant's overall a a similar situation
	Performance Abilities:	: 🗆 Top 1%	Top 10%	☐ Top 20%	☐ Top 50%	☐ Bottom 50%	☐ No basis for judgment
	Academic Abilities:	-	Top 10%	☐ Top 20%	☐ Top 50%	☐ Bottom 50%	☐ No basis for judgment
	• Talent:	-	Top 10%	☐ Top 20%	☐ Top 50%	☐ Bottom 50%	☐ No basis for judgment
							. •
	Application:		Top 10%	☐ Top 20%	☐ Top 50%	☐ Bottom 50%	☐ No basis for judgment
	• Achievement:	☐ Top 1%	Top 10%	☐ Top 20%	□ Top 50%	☐ Bottom 50%	☐ No basis for judgment
	background to help us t	to evaluate his/lon decision. Sub	her qualifica mit your con	tions for adm	ission. WMU val	ues a candid asses	academic and/ or personal sment of all candidates to Questions may be directed
	If necessary, attach	a separate sh	eet of pape	r for any add	ditional inform	ation.	
	I recommend this ap	plicant for adn	nission to V	orld Mission	n University		
	□ with enth	· iusiasm (적극적으	로 추천)	Г	with reservati	on (망석여진)	
		e confidence (추:	-			on (ㅎᆯ키급) nend admission (추:	처하지 않음)
	U WICH SOIII	c confidence (+	L 0)		_ r don t recolli	11C110 au1111331011 (T	L-171 180 <i>)</i>
	I certify that the inf	ormation I hav	ve provided	throughout	this application	on is complete an	d correct.
	Signature:				Date:		



### I-20 Request Form

\*유학생 지원자 해당서류

	ation on this application i			
1. Name			(as it appears on	your passport)
1. Name	Middle	Last		
2. Foreign Address:				
2 II C addross				
3. U.S. address:				
Street	City	State Zip	Col	untry
4. Date of Birth: /	/	5.Country of Birth:		
4. Date of Birth: /	Day Year			
6. Country of Citizenship:		7. Current Visa Status:		
8. Program of Study				
☐ AA in Christian Counseling ☐	BA in Christian Counseling	☐ BA in Social Work	☐ RN to BS in	Nursing
☐ MA in Counseling Psychology ☐	MA IN Music	☐ MA in Worship Stud	iles 🔲 MA in Gioba	i Leadersnip
☐ DMin ☐	DCM			
9. Dependent Information (peopl	e who will be coming as F	-2's) 		
Name :				
First		Date of Birth:		
FILZE	Last	Date of Birth:	h Day	Year
Relationship:	Last			Year
	Last	Country of Cit		Year
Relationship:	Country of Birth:	Country of Cit	cizenship:	
Relationship:  Name:	Country of Birth:	Country of Cit  Date of Birth:	h Day	Year Year
Relationship:	Country of Birth:	Country of Cit	h Day	
Relationship:  Name:	Country of Birth:	Country of Cit  Date of Birth:	h Day	
Relationship:  Name:  First  Relationship:  Name:  First	Country of Birth:  Last  Country of Birth:  Last  Last  Last	Country of Cit  Date of Birth:  Country of Cit  Date of Birth:  Mont  Mont	Day tizenship:  Day Day	
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Relationship:  Name:  First  Relationship:  Name:  First	Country of Birth:  Last  Country of Birth:  Last  Last  Last	Country of Cit  Date of Birth:  Country of Cit  Date of Birth:  Mont  Mont	Day tizenship:  Day Day	Year
Relationship:  Name:  First  Relationship:  Name:  First  Relationship:	Country of Birth:  Last  Country of Birth:  Last  Last  Last	Country of Cit  Date of Birth:  Country of Cit  Date of Birth:  Country of Cit  Country of Cit	Day cizenship:  Day cizenship:  Day cizenship:	Year
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#### **Required Documents:**

- Agreement of Financial Support
- Bank Statement Showing Sufficient Funds
- Transfer Request Form
- Copy of Passport, Visa & Previous I-20
- International Student Service Fee: \$300 (non-refundable)



# **Agreement of Financial Support**

\*유학생 지원자 해당서류

Name of Applicant (	(지원자 성명):		Date of Birth (생년월일):	/ /
	원하는 학기와 연도를 표시학			
☐ Fall Semester	☐ Spring Semester	☐ Winter Term	☐ Summer Term	Year:
	Applicant's Signature: _			Date:
Example of Es	timated Yearly Exper	ise		
Estimated year	ly expense for:			
		Family of 1:	\$ 25,000	
		Family of 2:	\$ 28,000	
		Family of 3:	\$ 30,000	
		Family of 4:	\$ 32,000	
(Yearly expense incl	ludes tuition & mandator	y fees, room & boar	d, books & supplies, health insura	ance, and miscellaneous expensis.)
To Be Complet	ted by Sponsors	Sponsor Signatu	re:	Date:
To Be Complet  2. Name of Sponso	or:		re:	Date:
<u> </u>	or:			
2. Name of Sponso	or:			
2. Name of Sponso	or:			
2. Name of Sponso 3. Address: 4. Phone Number:	or:			
<ol> <li>Name of Sponso</li> <li>Address:</li> <li>Phone Number:</li> <li>e-mail:</li> <li>Relationship to</li> <li>By signing this ag with tuition, livin</li> </ol>	or: Applicant: greement of financial su	pport, I promise to elevant expenses. I		e applicant indicated above provider of financial support
<ol> <li>Name of Sponso</li> <li>Address:</li> <li>Phone Number:</li> <li>e-mail:</li> <li>Relationship to</li> <li>By signing this agwith tuition, living for the applicant</li> </ol>	or: Applicant: greement of financial sung expense, and other reand that you may direct	pport, I promise to elevant expenses. I any financial ques	be <b>financially responsible</b> for the acknowledge that I am the sole p	e applicant indicated above provider of financial support me.
2. Name of Sponso 3. Address: 4. Phone Number: 5. e-mail: 6. Relationship to By signing this ag with tuition, livin for the applicant (재정 후원인은 재정	or: Applicant: greement of financial sung expense, and other reand that you may directed 후원약정서에 서명함으로	pport, I promise to levant expenses. I : any financial ques 상기 지원자의 학비, 설	be <b>financially responsible</b> for the acknowledge that I am the sole p tions regarding the applicant to r	e applicant indicated above provider of financial support me.