



Youth America College
Application Form

Personal Information

First Name

Last Name

Middle Initial

Address

City

State

Zip

Cell Phone

Email Address

Birth Date mm/dd/yy

Age

Gender

Marital Status Single Married Divorced

Facebook URL

Twitter

Instagram

Have you committed any felonies? yes no
if yes please explain.

Is there anything in your background that would prevent you from working with minors? yes no
If yes, please explain.

Do you now or have you ever used any of the following?

Tobacco? Yes No
Alcohol? Yes No
Illegal Drugs? Yes No

If yes, please explain.

Family Information-

Father's Name

Living Deceased

Father's Address

City

State

Zip

Father's Phone

Employer

Mothers Name

Living Deceased

Mother's Address - If different from above

City

State

Zip

Mother's Phone

Employer

How does your family feel about you entering Youth America College?

Will they be supporting you financially?

Education

High School

Dates Attended (Month/Yrs.) Graduated Yes No GPA

High School/College

Dates Attended (Month/Yrs.) Graduated Yes No Major/Minor GPA

High School/College

Dates Attended (Month/Yrs.) Graduated Yes No Major/Minor GPA

SAT Score:

ACT Score:

Please list any school or community activities that you have been involved in. (You may attach a resume or separate list.)

Employment History

1. Employer Name	Employer Phone	Dates of Service (Yrs. Mos.)	Occupation
<hr/>			
Address		City	State Zip
<hr/>			
Supervisor		Reason for leaving	
<hr/>			

2. Employer Name	Employer Phone	Dates of Service (Yrs. Mos.)	Occupation
<hr/>			
Address		City	State Zip
<hr/>			
Supervisor		Reason for leaving	
<hr/>			

3. Employer Name	Employer Phone	Dates of Service (Yrs. Mos.)	Occupation
<hr/>			
Address		City	State Zip
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Supervisor		Reason for leaving	
<hr/>			

Financial Information

Are there any reasons why you would not fulfill your tuition payments? If yes, please explain why and how you plan to accommodate.

List the total amount of current debts, loans, or payments you owe:

Do you own a vehicle? Yes No

Is it in good working condition? Yes No

Will you bring your vehicle with you to Youth America College? Yes No

Spiritual Information

Current Church Denomination Church Phone Years of involvement (Yrs. Mos.)

Church Address City State Zip

Senior Pastor Name

Age when you accepted Jesus as Savior Age when water baptised

Age when filled with the Holy Spirit

Please list any ministry experiences and/or positions you have held, paid or unpaid, inside and outside of your church and please include dates.

Personal References

Please complete the following information for the two references. We are enclosing two reference forms for you to give to the people you listed below. Please send the completed reference forms directly to us with your application. Do not use peers under the age of 21 or relatives. **Applications will not be complete without 2 references.**

Pastoral

Pastor's name

Church Name

Church Address

City

State

Zip

Church Phone

Length of Acquaintance

Phone

Teacher

Name

School Name

School Address

City

State

Zip

School Phone

Length of Acquaintance

Phone

In order to get to know you better, please take some time to answer honestly each of the following questions. Answers can be a few sentences to a paragraph in length.

PLEASE SHARE ABOUT YOUR OWN SALVATION EXPERIENCE.

SINCE BEING SAVED, DESCRIBE YOUR LIFE/JOURNEY AS A CHRISTIAN GOOD OR BAD.

DESCRIBE YOUR EXPERIENCE AND INVOLVEMENT IN THE CHURCH GOOD OR BAD.

WHY ARE YOU INTERESTED IN ATTENDING YOUTH AMERICA COLLEGE?

WHAT ARE YOU HOPING TO GET OUT OF OUR TWO YEAR PROGRAM?

I understand that my signature certifies my agreement with and support of the vision and purpose of Youth America College. I hereby affirm that the information provided in the application is complete and accurate to the best of my knowledge. I understand that if any information is found to be false or misleading, it will result in denial of admission or dismissal from Youth America College.

Printed Name of Applicant

Signature of Applicant

Date