

Please check the appropriate box for the program you are applying for.
(지원하는 해당 항목에 표시해 주십시오.)

1. Doctoral Degree Program (박사과정)

☐ Doctor of Ministry in CCSF (상담코칭과 영성형성 전공)

2. ☐ Integrated Master's with Doctoral Degree Program (석박사 통합 과정)

3. Term / Semester (지원하는 학기와 연도를 표시해 주십시오.) *Year: _____

Fall Semester

Spring Semester

Winter Term

Summer Term

PHOTO

2 in x 2 in
(51mm x 51mm)

Office Use Only

Student ID # _____

☐ I-20

☐ F/A

☐ OE

☐ Audit

☐ Visiting

☐ C

☐ N

☐ R

☐ T

☐ TC

e-mail: _____

@wmu.edu

Advisor: _____

Personal Information (인적사항)

3. Full Legal Name (영어 성명): _____
First Middle Last

4. Name in Korean (한글 성명): _____

5. Gender (성별):

☐ Male

☐ Female

6. Address (주소): _____
Street City State Zip Country

7. Phone Number (전화번호): _____
Home Work Mobile

8. e-mail Address (이메일): _____ 9. Date of Birth (생년월일): _____
Month / Day / Year

10. Citizenship: ☐ U.S. Citizen ☐ U.S. Permanent Resident ☐ Others: _____

11. Social Security Number: _____

12. Are you an international student? ☐ Yes ☐ No If yes, Country of Citizenship: _____

Family Information (가족사항)

13. Marital Status (결혼여부): ☐ Single ☐ Married ☐ Other: _____

14. If Married, Name of Spouse (배우자 성명): _____
First Last Date of Birth

15. Name of a Child: _____
First Last Date of Birth

Name of a Child: _____
First Last Date of Birth

Name of a Child: _____
First Last Date of Birth

Name of a Child: _____
First Last Date of Birth

16. Emergency Contact (비상 연락처)

Name: _____ Relationship: _____
First Middle Last

Phone Number: _____
Home Work Mobile

17. Do you have health insurance? (건강 보험)

☐ Yes ☐ No (If yes, provide insurance information.)

Insurance Company: _____ Policy Number: _____

18. Church Information (출석 교회 사항)

Church Name: _____ Year Attended: _____

Address (주소): _____
Street City State Zip Country

Phone Number (전화번호): _____
Home Work Mobile

Name of the Senior Pastor: _____ Denomination (교단): _____

19. Are you baptized? (세례 여부)

☐ Yes (If yes, Date: _____) ☐ No

20. Position at Church

- ☐ Senior Pastor (담임 목사) ☐ Associate Pastor (부목사) ☐ EM Pastor (영어 목회 목사) ☐ Youth Pastor (청소년 목회)
☐ Intern Pastor (전도사) ☐ Pastor's Wife (목사 사모) ☐ Missionary (선교사) ☐ Elder (장로) ☐ Kwonso (권사)
☐ Ordained Deacon/Deaconess (안수집사) ☐ Deacon/Deaconess (서리 집사) ☐ Laity (평신도) ☐ Other (기타): _____

21. Ministry / Volunteer Information (사역/봉사 현황)

Church Name: _____ Period: _____

Briefly describe your ministry: _____

Church Name: _____ Period: _____

Briefly describe your ministry: _____

22. Education History (학력사항: 최종 학력을 먼저 기입하십시오.)

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: _____

DMin in CCSF Application

23. 목사 안수 여부 ☐ 받았음 ☐ 안받았음

24. 체류 신분 ☐ 영주권, 시민권 ☐ 유학생 (I-20 expiration date): _____ ☐ 미국 외 거주자

25. 석사학위 과정 졸업년도 ☐ 졸업년도: _____

26. GPA 4.0 만점에 3.0 이상 입니까? ☐ Yes ☐ No

27. 입학할 때 가장 중요하게 고려하는 사항은?

☐ 저렴한 학비 ☐ 학위 ☐ 공부하면서 가질 수 있는 시간적 여유 ☐ 사역/직장 등과 병행할 수 있는 가능성

28. 졸업 후 계획

29. 추천인 정보

* 이름 (소속/직위): _____ (_____) * e-mail: _____

* 이름 (소속/직위): _____ (_____) * e-mail: _____

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: _____

OFFICIAL USE ONLY

☐ Accepted

☐ Conditionally Accepted

☐ Not Accepted

Faculty Signature: _____ Date: _____

<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 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. Two References

☐ Pastoral Reference

☐ Academic Reference

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.

☐ I do not agree to waive access to this reference form.

Applicant's Signature: _____ 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: _____
First Last Date of Birth

Position / Title: _____

Name of Institution (Church, etc.): _____

Phone Number: _____ e-mail: _____

Are you WMU alumnus? ☐ Yes (Year of Graduation: _____) ☐ No

5. What's your relationship to the applicant? (친인척 관계는 추천자가 될 수 없습니다.) _____

6. How long have you known the applicant? _____ Year(s) _____ Month(s)

7. How well do you know the applicant? ☐ Casually ☐ Well ☐ Very Well

8. To your Knowledge, has the applicant made a personal commitment to Jesus Christ?

(지원자가 예수 그리스도께 헌신되어 있다고 봅니까?)

☐ Yes

☐ No

☐ Don't Know

9. How does the applicant demonstrate a commitment to Christ in his/her lifestyle?

(지원자의 삶 속에서 예수 그리스도에 헌신되어 있다는 것을 어떻게 나타내 보입니까?)

Reference Continued

10. How would you describe the nature of the applicant's character?
(지원자의 성품을 아는대로 설명하십시오.)

11. How does the applicant demonstrate his/her emotional stability?
(지원자의 정서적인 측면에 대해서 아는대로 기술하십시오.)

12. What do you think of the applicant's relationships and attitude towards peers and supervisors?
(동료들이나 상사에 대한 태도나 관계에 대해서 아는대로 기술하십시오.)

13. Do you have any reservations about this person's ability to do graduation work at the graduation degree level?
(대학원 수준에서 학업을 수행할 능력에 대해서 염려가 되십니까?)

☐ Yes

☐ No

If Yes, _____

14. Are there any circumstances relating to this applicant the University should know before deciding upon his/her admission?
(입학여부를 결정하기에 앞서, 본교가 반드시 알아야 할 지원자와 관련된 사항이 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)

☐ 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: _____

Statement of Purpose

Name: _____ 이름: _____

1. 당신 인생의 꿈, 비전, 목표와 그것을 품게 된 계기를 쓰시오.

2. 그 꿈을 이루기 위한 한 과정으로 왜 DMin in CCSF가 필요하다고 생각했는지 쓰시오.

3. DMin in CCSF에서 꼭 공부하고 싶은 분야나 주제를 쓰시오.

4. DMin in CCSF에서 그것을 공부한 후 하나님의 사역을 위해 어떻게 사용하고자 하는지 쓰시오.

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: _____

Please complete all the information on this application in English

1. Name _____ (as it appears on your passport)
First Middle Last

2. Foreign Address: _____

3. U.S. address: _____
Street City State Zip Country

4. Date of Birth: _____ / _____ / _____
Month Day Year

5. Country of Birth: _____

6. Country of Citizenship: _____

7. Current Visa Status: _____

8. Program of Study

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> AA in Christian Counseling | <input type="checkbox"/> BA in Christian Counseling | <input type="checkbox"/> BA in Social Work | <input type="checkbox"/> RN to BS in Nursing |
| <input type="checkbox"/> MA in Counseling Psychology | <input type="checkbox"/> MA in Music | <input type="checkbox"/> MA in Worship Studies | <input type="checkbox"/> MA in Global Leadership |
| <input type="checkbox"/> DMin | <input type="checkbox"/> DMin in CCSF | <input type="checkbox"/> DCM | |

9. Dependent Information (people who will be coming as F-2's)

Name : _____ Date of Birth: _____
First Last Month Day Year

Relationship: _____ Country of Birth: _____ Country of Citizenship: _____

Name : _____ Date of Birth: _____
First Last Month Day Year

Relationship: _____ Country of Birth: _____ Country of Citizenship: _____

Name : _____ Date of Birth: _____
First Last Month Day Year

Relationship: _____ Country of Birth: _____ Country of Citizenship: _____

Name : _____ Date of Birth: _____
First Last Month Day Year

Relationship: _____ Country of Birth: _____ Country of Citizenship: _____

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)

Name of Applicant (지원자 성명): _____ Date of Birth (생년월일): ____/____/____

Program you are applying for (지원학과): _____

Term / Semester (지원하는 학기와 연도를 표시해 주십시오.)

☐ Fall Semester ☐ Spring Semester ☐ Winter Term ☐ Summer Term Year: _____

Applicant's Signature: _____ Date: _____

Example of Estimated Yearly Expense

Estimated yearly expense for:

Family of 1: \$ 19,000

Family of 2: \$ 22,000

Family of 3: \$ 24,000

Family of 4: \$ 26,000

(Yearly expense includes tuition & mandatory fees, room & board, books & supplies, health insurance, and miscellaneous expensis.)

To Be Completed by Sponsors

Sponsor Signature: _____

Date: _____

2. Name of Sponsor: _____

3. Address: _____

4. Phone Number: _____

5. e-mail: _____

6. Relationship to Applicant: _____

By signing this agreement of financial support, I promise to be **financially responsible** for the applicant indicated above with tuition, living expense, and other relevant expenses. I acknowledge that I am the sole provider of financial support for the applicant and that you may direct any financial questions regarding the applicant to me.

(재정 후원인은 재정 후원약정서에 서명함으로 상기 지원자의 학비, 생활비 및 제반비용에 대한 일체의 재정적 책임을 질 것을 약속합니다.)

Sponsor's Signature: _____ Date: _____