

*Dr. Joseph I. James  
Founder/President*

*Dr. Jason Hunt  
President, KHBCS, USA*

**MISSIONS AT ALL COST**

# **MISSIONS AND WORLD EVANGELISM BIBLE COLLEGE**

An Official Extension Unit Of

## **KINGDOM HARVEST**

### **BIBLE COLLEGE AND SEMINARY, INDIANA, USA**

**RAISING AN ARMY OF MISSIONARIES TO IMPACT THE WORLD FOR CHRIST**

**BP. 302 Douala – Cameroon Tel : 237 795 48 88 / 990 52 78 / 795 48 89 / 995 21 46**

**Email :- douala@mawebco.org, mawebco@yahoo.fr Web Site : www.mawebco.org**

### **ADMISSION APPLICATION FORM**

NAME \_\_\_\_\_

TEL \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_

DATE AND PLACE OF BIRTH \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_ SEX \_\_\_\_\_

NUMBER OF CHILDREN \_\_\_\_\_

PROFESSION \_\_\_\_\_

	<b>EDUCATIONAL ACHIEVEMENTS</b>	<b>SCHOOLS ATTENDED</b>	<b>DATES ATTENDED</b>
1			
2			
3			
4			
5			
6			

**DENOMINATION** \_\_\_\_\_

**PASTOR'S NAME** \_\_\_\_\_

S/N <sup>o</sup>	POSITION IN THE CHURCH NOW	POSITIONS HELD IN THE CHURCH BEFORE
1		
2		
3		
4		
5		

ARE YOU CALLED BY GOD ? \_\_\_\_\_

HOW DO YOU KNOW ? \_\_\_\_\_

\_\_\_\_\_

HAVE YOU BEEN TRAINED BEFORE ? \_\_\_\_\_

IF YES, WHERE ? \_\_\_\_\_

WHEN ? \_\_\_\_\_

ARE YOU BORN AGAIN ? \_\_\_\_\_

WHEN ? \_\_\_\_\_

ARE YOU BAPTISED BY IMMERSION ? \_\_\_\_\_

WHEN ? \_\_\_\_\_

ARE YOU BAPTISED IN THE HOLY GHOST ? \_\_\_\_\_

DO YOU SPEAK IN TONGUES ? \_\_\_\_\_

DO YOU HAVE ANY SPIRITUAL GIFTS ? \_\_\_\_\_

HOW DID YOU KNOW ABOUT US ? \_\_\_\_\_

\_\_\_\_\_

WHAT COURSE DO YOU WANT TO DO ?			
S/N <sup>o</sup>	DURATION	COURSE	QUALIFICATION
1	1 Year	Missions/ Inspirational Theology	Diploma
2	1 Year	Computer Study	Certificate
3	2 Years	Theology	Diploma
4	1 Year	C. Ed / P.Min. / Missions / Divinity / Theology	Bachelor Degree
5	1 Year	C. Ed / P.Min. / Missions / Divinity / Theology.	Masters Degree
6	1 Year	C. Ed / P.Min. / Missions / Divinity / Theology.	Doctorate Degree

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**ADDITIONAL ADMISSION REQUIREMENTS**

**REGISTRATION FEE : 5. 000frs CFA (Diploma) / 10.000frs CFA (Degree program)**

- **1 FILE**
- **TWO RECENT PASSPORT PHOTOGRAPHS**
- **A LETTER FROM YOUR FINANCIAL SPONSOR**
- **PHOTOCOPIES OF YOUR CERTIFICATES**
- **OFFICIAL TRANSCRIPTS FROM THOSE FOR DEGREE PROGRAM**
- **GIVE A PERSONAL TESTIMONY OF YOUR CONVERSION AT LEAST 300 WORDS.**  
(Use a different sheet please)

**N/B: No admission will be accepted without the complete admission requirements.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**FOR OFFICE USE**

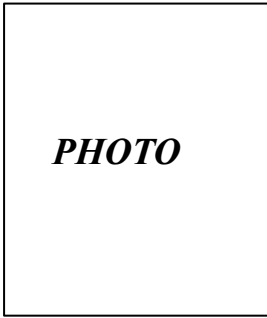
**Admission No:** \_\_\_\_\_ **Kind of Admission:** \_\_\_\_\_

**Remarks:** \_\_\_\_\_

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***RECTOR***

***REGISTRAR***



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*Est. In/ETBLIEN 1989*

**MISSIONS A TOUT PRIX**

**COLLEGE BIBLIQUE DE MISSION ET D'EVANGELISATION MONDIAL**

Une Unité d'Extension Officiel de la

**SOUTHERN INDIANA BIBLE COLLEGE AND SEMINARY, INDIANA, USA**

**UN COLLEGE INTERDENOMINATIONEL BASE SUR LA BIBLE QUI FORM LES AFRICAINS EN VUE D'ATTENDRE NLE MONDE POUR CHRIST**

**BP. 302 Douala – Cameroon Tel : 237 795 48 88 / 990 52 78 / 795 48 89 / 995 21 46**

**Email :- mawebco@yahoo.fr & mawebco@dominionfaithinternational.org**

**WEBSITE : www.mawebco.org & www.dominionfaithinternational.org/college**

**FORMULAIRE D'ADMISSION**

NOM \_\_\_\_\_

ADRESS COMPLETE \_\_\_\_\_

TEL \_\_\_\_\_ EMAIL \_\_\_\_\_

DATE ET LIEU DE NAISSANCE \_\_\_\_\_

SITUATION FAMILIALE \_\_\_\_\_ SEXE \_\_\_\_\_

NOMBRE D'ENFANTS \_\_\_\_\_

	<b>DIPLOME OBTENUS</b>	<b>ETABLISSEMENTS FREQUENTES</b>	<b>DATE FREQUENTES</b>
1			
2			
3			
4			
5			
6			

PROFESSION \_\_\_\_\_

DENOMINATION \_\_\_\_\_

NOM DU PASTEUR \_\_\_\_\_

S/N <sup>o</sup>	RESPONSABILITES ACTUELLES DANS L'EGLISE	RESPONSABILITES PASSES DANS L'EGLISE
1		
2		
3		
4		
5		

ETES-VOUS APPELLE PAR DIEU ? \_\_\_\_\_

COMMENT LE SAVEZ VOUS ? \_\_\_\_\_

AVEZ-VOUS DEJA ENTRAINE AUPARAVANT ? \_\_\_\_\_

SI OUI , OU ? \_\_\_\_\_

QUAND ? \_\_\_\_\_

ETES -VOUS NE DE NOUVEAU ? \_\_\_\_\_

QUAND ? \_\_\_\_\_

ETES-VOUS BAPTISE PAR IMMERSION ? \_\_\_\_\_

QUAND ? \_\_\_\_\_

AVEZ-VOUS RECU LE BAPTEME DANS LE SAINT ESPIRIT ? \_\_\_\_\_

PARLEZ-VOUS EN LANGUE ? \_\_\_\_\_

AVEZ-VOUS DES DONS SPIRITUELLES ? \_\_\_\_\_

COMMENT AVEZ-VOUS CONNU NOTRE COLLEGE ? \_\_\_\_\_

QUELLE COURS PREFEREZ-VOUS SUIVRE ?			
S/N <sup>o</sup>	DUREE	COURS	QUALIFICATION
1	1 AN	Missions/ Théologie Inspirationnelle	Diplôme
2	1 AN	Computer Study	Certificat
3	2 ANS	Théologie	Diplôme / Diploma
4	1 AN	Ed. C / Ministère Pratique. / Missions / Divinité / Théologie	Licence
5	1 AN	Ed. C / Ministère Pratique. / Missions / Divinité / Théologie	Mètres
6	1 AN	Ed. C / Ministère Pratique. / Missions / Divinité / Théologie	Doctorale

**CONDITIONS D'ADMISSIONS SUPPLEMENTAIRES**

FRAIS D'INSCRIPTION: **5 . 000 FCFA Pour Diplôme et 10.000FRS CFA pour le Licence, Mètres & Doctorat**

- 1 CHEMISE
- DEUX CARTES PHOTOS 4 X 4
- UNE LETTRE DE VOTRE SPONSOR FINANCIER
- DES PHOTOCOPIES DE VOS DIPLOMES
- SUR UNE FEUILLE DETACHEE, ECRIVEZ VOTRE TEMONIAGE DE SALUT.
- TRANSCRIPTIONS OFFICIELLES POUR CES OFFRANT PROGRAMMES DU DEGRE

**N/B: Aucune admission ne sera acceptée sans les exigences de l'admission complètes.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**POUR USAGE DU BUREAU**

N° d' admission : \_\_\_\_\_ Genre d'Admission: \_\_\_\_\_

Observations: \_\_\_\_\_

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**Minister’s Reference – PRIVATE & CONFIDENTIAL**

Name of Applicant \_\_\_\_\_

Address of Applicant \_\_\_\_\_

(Please answer these questions to the best of your ability)

1. How long do you know the Applicant? \_\_\_\_\_

2. How well do you know the Applicant? (Please tick boxes a appropriate)

Church member  Friend  Acquaintance  Other

3. How involved is the Applicant in your church? (Please tick boxes a appropriate)

Occasional visitor  Regular Attender  Helper

They do whatever their hands find to do  Head of Department

\*Please state what areas he/she is involved in \_\_\_\_\_

\_\_\_\_\_

4. In your capacity as the Pastor of the Applicant:-

(a) Do you believe he/she have a call of God on he/she live? Yes / No

(b) Do you believe he/she have a desire to serve God in whatever way he/she can? Yes / No

**PERSONAL REFERENCE:** (Please answer to the best of your ability)

1. How would you assess the Applicant’s personal honesty and integrity? (Please tick box)

Excellent  Good  Fair  Not so good  Poor

2. How would you assess the Applicant’s health? (Please tick box)

Excellent  Good  Fair  Not so good  Poor

Please use the space below for any further comments you wish to make about the Applicant which would be helpful in considering his/her application to attend MAWEBCO.

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I have completed the above Reference to the best of my knowledge and ability.

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

(Please type or print)

Your Name: \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Tel: \_\_\_\_\_

Church Name: \_\_\_\_\_

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

Thank you for taking the time to complete this Reference – serious consideration will be given to your comments. Please return this form direct to Missions And World Evangelism Bible College at BP. 302 Douala or at any of our church office (Dominion Faith, Besides marbled house, Nouvelle Route Bonadibong or Opp. Shell old road, Bonaberi). It will be treated with the strictest confidence.

**FOR OFFICE USE**

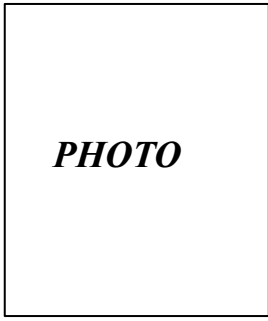
**Ref. No:** \_\_\_\_\_

**Admission N°** \_\_\_\_\_

**Notes:** \_\_\_\_\_

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**Personal Reference – PRIVATE & CONFIDENTIAL**

Name of Applicant \_\_\_\_\_

Address of Applicant \_\_\_\_\_

(Please answer these questions to the best of your ability)

1. How long do you know the Applicant? \_\_\_\_\_

2. How well do you know the Applicant? (Please tick boxes a appropriate)

Close personal friend  Friend  Acquaintance  Other

3. What has benn the nature of your acquaintance? Were you..... (Please tick box)

Employer  Co- worker  Family friend

Personal friend  Neighbour  Other

**PERSONAL REFERENCE:** (Please answer to the best of your ability)

1. How would you assess theApplicant’s personal honesty and integrity? (Please tick box)

Excellent  Good  Fair  Not so good  Poor

2. How would you assess the Applicant’s health? (Please tick box)

Excellent  Good  Fair  Not so good  Poor

Please use the space below for any further comments you wish to make about the Applicant which would be helpful in considering his/her application to attend MAWEBCO.

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I have completed the above Reference to the best of my knowledge and ability.

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

(Please type or print)

Your Name: \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Tel: \_\_\_\_\_

Church Name: \_\_\_\_\_

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

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**Notes:** \_\_\_\_\_

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