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## APPLICATION FOR ADMISSION

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### BASIC INFORMATION

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1. Name (First/Middle/Last): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
Birth Date (m/d/y): \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Social Insurance Number: \_\_\_\_\_ Telephone: ( \_\_\_\_ ) \_\_\_\_\_  
Email \_\_\_\_\_ Cell: \_\_\_\_\_  
Gender:  Male  Female Marital Status:  single  married  divorced  separated  
Number of Dependents: \_\_\_\_\_

2. Names of Parents/Guardians: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
Occupation(s): \_\_\_\_\_  
Telephone: (home) \_\_\_\_\_ (work) \_\_\_\_\_  
Address: (work) \_\_\_\_\_

### CHURCH INFORMATION

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1. Have you received Jesus Christ as Lord and Saviour?  yes  no When? \_\_\_\_\_  
2. Name of church you currently attend: \_\_\_\_\_  
3. If no church affiliation, state preference: \_\_\_\_\_  
4. Details of activity in a congregation: \_\_\_\_\_

## ACADEMIC INFORMATION

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### Secondary

1. Highest Grade Completed: \_\_\_\_\_ In What Year: \_\_\_\_\_ Province/State: \_\_\_\_\_

Name and Address of High School: \_\_\_\_\_

Graduation from: \_\_\_\_\_ Year: \_\_\_\_\_

We require an official high school transcript. An official transcript is a signed, sealed copy of your academic courses completed. ***These transcripts from your local high school, a GED issued by the Provincial Department of Education or a certificate of home-schooling from the recognized authority, must be forwarded directly to MCC.***

### Post-Secondary

2. College or University: \_\_\_\_\_ Total Years or Semester Hours: \_\_\_\_\_

Program taken: \_\_\_\_\_

Degree or Diploma granted: \_\_\_\_\_ Year: \_\_\_\_\_

We require an official post-secondary college or university transcript. An official transcript is a signed, sealed copy of your academic courses completed. ***These transcripts must be forwarded directly to MCC from the school.***

3. Were you ever dismissed or suspended from any school?  yes  no

Reason for dismissal or suspension: \_\_\_\_\_

## REGISTRATION

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What program do you wish to pursue at M.C.C.?

- |   |   |
|---|---|
| <input type="checkbox"/> Bachelor of Arts (Bible)           | <input type="checkbox"/> Associate of Arts Diploma    |
| <input type="checkbox"/> Bachelor of Arts (General Studies) | <input type="checkbox"/> Biblical Studies Certificate |
| <input type="checkbox"/> Bachelor of Arts (Child and Youth) | <input type="checkbox"/> Ministerial Diploma          |
| <input type="checkbox"/> Bachelor of Bible and Ministry     | <input type="checkbox"/> Ministry Certificate         |
| <input type="checkbox"/> Part-time                          | <input type="checkbox"/> Unsure                       |

Anticipated enrollment: Year: 20\_\_\_\_

Semester:  September  January

## HOUSING

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Accommodations required for the year (dorm room)?  yes  no

It is required that all students live on campus. See page 34 in the MCC Catalogue for exceptions. ***The "Application for Residency" form must be filled out and submitted along with a \$150 room deposit by August 1.***

## TRAVEL

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Student and faculty may travel outside Canada on ministry trips during the year.

Are you able to travel outside Canada?  yes  no

Do you have a passport?  yes  no

Name as it appears on passport: \_\_\_\_\_

Passport expiry date: \_\_\_\_\_ Passport Number: \_\_\_\_\_

## FINANCES

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Do you have adequate finances for your first year?  yes  no

If not, how are you planning to cover your expenses at Maritime Christian College?

\_\_\_\_\_

## CHARACTER

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1. Do you use tobacco, intoxicating beverages, or habit-forming drugs?  yes  no

If yes, please explain: \_\_\_\_\_

2. Have you ever been arrested or convicted of a criminal offence?  yes  no

If yes, please explain: \_\_\_\_\_

3. Are there any other personal issues that Maritime Christian College needs to be aware of?  yes  no

If yes, please explain: \_\_\_\_\_

4. Do you accept the Christian ideals of living as set forth in the New Testament and are you willing to conduct your life in harmony with them?  yes  no

If no, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **Submit a Photo and a typed Personal Essay of 250-350 words** describing your goals in education, occupation and life, and also why you desire to attend MCC. Briefly relate your spiritual journey to date and how your relationship with Jesus has improved your life since becoming a Christian. If you are transferring from another Bible College, give reasons.

## REFERRAL

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I have been referred by a current MCC Student or Admissions Counsellor:  yes  no

\_\_\_\_\_  
MCC Student or Admissions Counsellor Name  
(please print)

\_\_\_\_\_  
MCC Student or Admissions Counsellor Signature

## REFERENCES

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Please give the name and address of three character references, these recommendations will be seriously considered in determining your admission. We encourage at least one of these references be an elder or a minister and suggest one employer or someone with whom you have had a business relationship. These must not be relatives. ***Distribute the three enclosed "Applicant Reference" forms and return envelopes to your chosen references.***

Minister     Elder     Teacher     Employer

Name (First/Last): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Minister     Elder     Teacher     Employer

Name (First/Last): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Minister     Elder     Teacher     Employer

Name (First/Last): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**I declare that the above are answered fully and accurately to the best of my knowledge. If admitted, I agree to abide fully with all rules and standards of the College.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Mail to: Admissions Office, Maritime Christian College, 503 University Ave., Charlottetown, PE C1A 7Z4**

**Email to: [admissions@mccpei.com](mailto:admissions@mccpei.com)**

**Fax to: 902-892-3959**