

INTENSIVE MISSIONARY TRAINING CENTRE (IMTC)

Sovima E-Khel Dimapur : Nagaland

ADMISSION FORM

1. Name:
2. Father's Name:
3. Mobile No:(self).....(Father/Mother)
4. Present Address :
5. Date of birth & place:
6. Permanent Address:
7. Name of your Church:
8. Name of your Pastor:
- Mobile No:
9. Your Education Qualification with Certificate:
10. Your Sponsor authority assurance or recommendation letter either from your guardian or parents or by your church or some ones, who is going to sponsor you. a) Full Sponsor Rs. 3000/- (admission/Registration once only) plus Rs. 2000/- Monthly for fooding lodging, teaching etc. for one year or 12 moths i.e Rs. 27,000/- only. b) Half (50% sponsor Rs. 3000/- once only Rs. 1000/- month for 1 year or 12 months i.e Rs. 15,000/- only. c) Apart only i.e Rs. 3000/- once only for Registration and admission fee. For those students who are from under poverty line. Required recommendation either from Pastor or the one who introduced IMTC course to him or her. Stating that he or she is from very poor family who need some ones (believers) to sponsor him/ her during studied period.
11. Your hobby/ interest:
- Date of (a) water baptism.....Date of
(b) Holy Spirit Baptism..... (the first experience of the work of holy spirit Vol. H-9 TEN Magazine 2021 in your life).
12. Have you been to fasting & prayer programme at any time before? Yes/No if yes for how many days
13. Life problems? If any. Please mention

- (a) Physical sickness problem?
- (b) Mental sickness problem?
- (c) Spiritual sickness problem?
- (d) Drug addiction problem?
- (e) Alcoholic addiction problem?
- (f) Narcotic addiction problem?
- (g) Mobile phone addiction problem?
- (h) Any other life problem?

14. Do you go to church every Sunday? Yes/No If not how many time have you been to church last year?.....

15. Do you read your Bible every day? Yes/No If not how many time in a moth.....

16. Your father and mother both still alive? Yes/No If yes do they stay together or divorce?

17. How many brothers & sisters do you have?

Write their names

N.B:- Fill up the form along with one passport photo and send to Dr. Kip Rio whats app No. 9436004945 Email:- kiprio@yahoo.com / vithodavid@gmail.com

MINISTRY

Date:

Signature of Candidate