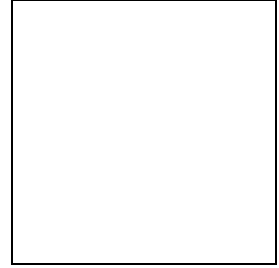


# CHRISTIAN FAITH INSTITUTE

## APPLICATION FORM



Tetengi Estate  
Opposite Zang Commercial Secondary School  
P.O. Box 458, Jos Road, Bukuru 930254  
Jos, Plateau State, Nigeria  
E: [info@cfaithministries.org](mailto:info@cfaithministries.org)  
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P: +234 (0) 8077616806  
+234 (0) 8039498613  
+234 (0) 7094120118



OFFICE USE ONLY:

NAME: \_\_\_\_\_  
                    SURNAME                    MIDDLE NAME                    FIRST NAME

MATRIC No: \_\_\_\_\_

## WELCOME NOTE TO CFI STUDENTS

CFI is an interdenominational, international and intertribal institution. No student is hindered on any personal basis. CFI operates on the basis of firmness and transparency. No staff member is permitted to hinder any student with regard to any policy in the institution or to require any gift to provide a service or relax a policy. The same Christian standard is required of all students.

## PROGRAMMES OFFERED:

*Diploma of Bible and Theology*: Two years full-time. Entrance each January and July. Applicants must be 20 years old and above.

*Bachelor Degree in Theology*: Two years full-time. Entrance each January and July. Students applying for the degree programme from outside CFI must complete one bridging course in theology and have a background in Greek and Hebrew or complete those modules in the CFI Diploma programme.

*Masters Degree in Theology*: Eighteen months duration.

*Weekend Programme*: Second and third weekend of every month, Diploma and Degree: Three years Diploma, three years Degree.

*Part-Time Programme*: For applicants who can demonstrate responsibilities that prevent them from full-time enrolment: Each June/July for three full weeks: Three years Diploma, three years Degree. Weekend and Part-Time programmes include home studies.

*Correspondence Studies*: Apply at the office for details. Includes Diploma and Degree.

Applicants applying for a reduction in their number of modules must supply documentary evidence of satisfactory previous studies. CFI reserves the right of assessment in this matter.

## CFI HAS BOARDING FACILITIES FOR MALE AND FEMALE STUDENTS

The CFI kitchen provides for meals. Students are not permitted to cook their own food. Boarding students must follow CFI timetables for daily meals and activities. CFI does not provide meals for the *Part-Time Refresher* programme.

## STUDENTS MUST ABIDE BY THE POLICIES AND REGULATIONS OF CFI, OR BE DISMISSED FROM THE INSTITUTE

These policies are communicated to the student in the *Student Rules and Honor Code*. CFI reserves the right to adjust the policies and regulations in accordance to what the administration deems in meeting the needs of the students.

## STUDENTS APPLYING TO CFI MUST SUBMIT THE FOLLOWING

1. A completed application form
2. A pastor's reference letter
3. One passport photo
4. A brief essay on your personal salvation experience
5. An application fee of N1,500 (Diploma) or N2,000 (Degree). Part-Time (PT), Weekend (Wk) and Correspondence: add N500. Application fee for the Masters is N5,000.

## ENROLLMENT MUST BE ACCOMPANIED BY THE PAYMENT OF RELEVANT FEES AS FOLLOWS: Diploma/Degree per semester, Part-Time per year, Correspondence per module:

	Diploma Fees	Degree Fees	Masters Fees	Dip.PT/Wk	Deg.PT/Wk	Correspondence
Boarding Fee	N20, 000+	N25,000	*	N25,000	N30,000	N3,000 per module
Day Student	N10, 000	N15,000	N50,000	N15,000	N20,000	
Library Fees	N1,000	N1,000	N1,500	N1,000	N1,000	
Internet Fee	N500	N500	N2,000	N500	N500	
Dean's Levy	N600	N 600	N1,500	N600	N600	
Exam Fee	N500	N500	N2,000	N500	N500	

\*Masters Students also pay for the hostel and for meals from CFI if used.

+ Full-Time Diploma Scholarship students pay half. Scholarships do not exist for degree students, or for Weekend, Part-Time or Correspondence programmes. Some “full scholarships” for Full-Time Diploma students may be obtainable for particular missions related areas, with written consent from the President of CFI.

NOTE: Students should make additional financial provision for books and other materials. If the student wishes to apply for a scholarship they must write an application letter stating the cause. CFI may require further documentary evidence to support the student’s application. CFI reserve the right to adjust fees or add new fees structures as occasion demands.

CFI MAY REQUIRE ANY DOCUMENTARY EVIDENCE RELATED TO HEALTH MATTERS AND ANY OTHER MATTER RELATED TO THEIR APPLICATION.

- Admission is granted to any person regardless of background who meets the following criteria: They have a call of God on their lives, with fruitful service in a local church. They have a recommendation from a local church pastor. They meet their fee obligations, without debt to outsiders. CFI reserves all rights on students admission
- There are no academic requirements for admission. Some student will be required to complete bridging or O Level modules. Failing that, the student will be graduated with a Certificate.
- All students will be expected to do manual labor. This may include compound maintenance, farming, building or any manual labor deemed beneficial to the community.
- All students shall maintain the equal status irrespective of background. Policies and regulations (including all activities and time schedules) apply equally to all students. Student may be given different level of responsibilities in serving CFI.
- Students will be required to attend all church programmes. Boarding students will attend Pentecostal Christian Faith Assembly (PCFA). They will also serve the church in any way that is conducive to the furtherance of the gospel. Day students will attend PCFA unless they can satisfactorily show they are faithfully serving in another congregation. Ongoing acceptance in CFI is dependant on faithful participation in local church life.
- Each Jun/July Diploma students will participate in Practical Ministry in a local church. This will be repeated each December-January. The church will be asked to report to CFI on each practical period. It is the responsibility of the student to be invited to a suitable church for these practical periods. Each student is also involved in outreach and a church planting ministry while enrolled in CFI.
- Diploma and Degree students are part of one body in all ways deemed conducive by CFI.
- Students shall keep commitments. If they have been sent to CFI by a church on the agreement they will return to that after graduation, CFI will require the student to return or withhold their graduation certificate. Graduation will be successful only if the student has demonstrated character suitable for church ministry.
- CFI reserves the right to change any statement on this *Application Information* as and when required, without notice. Student shall have no appeal to CFI or to PCFA for work done by free will while they are students. This work is given voluntarily and freely to further the work of the gospel of Jesus Christ, in keeping with Christian character. The same is required of staff members.

CFI RUNS ON THE SEMESTER BASIS. Classes start in January and run to June. After five weeks break classes resume in July and run till December. The Part-Time programme is held in June/July, during the semester break. Full-time students have one week *mid-semester break* in March/April and again in September/October. CFI reserves the right to change any date and activity when necessary. *For graduation and all other details see the Student Handbook.*

Registrar

CHRISTIAN FAITH INSTITUTE  
APPLICATION FORM

Section One

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_  
Marital Status: Single \_\_\_\_\_ Engaged \_\_\_\_\_ Married \_\_\_\_\_  
Divorced \_\_\_\_\_ Church \_\_\_\_\_ Traditional \_\_\_\_\_  
Number of children and their ages \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_  
Tribe \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone Number(s) \_\_\_\_\_  
Email Address \_\_\_\_\_  
Fax Number \_\_\_\_\_

Section Two

Qualifications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Skills: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section Three

Church Name: \_\_\_\_\_  
Church Address: \_\_\_\_\_  
Church Phone (s): \_\_\_\_\_  
Web Site: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
How long have you been member of that church? \_\_\_\_\_  
What responsibilities did you have in that church? \_\_\_\_\_

Section Four

What program in CFI are you applying for?  
Please indicate Yes/No Diploma \_\_\_\_\_ Degree \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_  
Weekend \_\_\_\_\_ Masters \_\_\_\_\_ Boarding \_\_\_\_\_ Day \_\_\_\_\_ Correspondence \_\_\_\_\_

Section Five

Nearest contactable family member:

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

Relationship: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email address: \_\_\_\_\_

I have read and pledge to abide by the rules of the Institute

Signed: \_\_\_\_\_

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

Section Six Office Use

CFI Interviewer comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is this application accepted: Yes/No \_\_\_\_\_

If not what is the remedy if any? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed by CFI Officer: \_\_\_\_\_ Date: \_\_\_\_\_

CHRISTIAN FAITH INSTITUTE  
APPLICATION REFERENCE FORM  
(To be filled by the applicants' pastor)

Section One

Application's Name: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

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

Pastor's Phone: \_\_\_\_\_

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

\_\_\_\_\_

Web Site: \_\_\_\_\_

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

Fax Number: \_\_\_\_\_

Section Two

What evidence (if any) is there of a call of God on the applicant?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the applicant sound in physical and mental health? Yes/No

If not please supply more details:

\_\_\_\_\_

\_\_\_\_\_

Is there any lawful or moral impediment to the applicant training at CFI Yes/No?

If not please supply more details::

\_\_\_\_\_

Section Three

What are the applicants' responsibilities in your church? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How well has the applicant fulfilled these responsibilities? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you or your church sponsoring this applicant to CFI? If yes, then please explain what expenses you are covering such a fees, personal expenses or other expenses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you expecting the applicant to return to your church for ministry practical? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Section Four

After reading the CFI Application Information please answer the following question

Do you recommend this applicant to be a student at CFI?

YES/NO \_\_\_\_\_

Section Five

Please complete this form by signing below and affixing either your church stamp or seal.

Thank you for your cooperation.

Signed: \_\_\_\_\_

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

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

Affix seal here:

Additional information relevant to any question above or related matter can be written below or on a separate sheet(s) and attached:

CHRISTIAN FAITH INSTITUTE  
MEDICAL QUESTIONNAIRE FOR STUDENT APPLICANTS

We are concerned to ensure that our students study in a healthy environment. Our health standard means that we require every applicant to provide basic information about their health. The admission of students to the CFI will be subject to the satisfactory completion of this medical questionnaire. The health of each applicant is considered individually and no decision to reject an applicant on health grounds is made without referral to a medical advisor. We are an equal opportunities institute. Any information given on any disability will assist us in assessing whether reasonable provision can be made for the student's needs.

Applicants should complete Part 1 of the following questionnaire.

Applicants should comply with the requirement of Part 2 of the questionnaire.

Please ask your doctor/registered medical practitioner to complete Part 3 of the questionnaire.

Once the questionnaire has been completed either you or your doctor/registered medical practitioner should return it to the CFI Registrar sealed in enclosed envelop. All medical information will be treated in the strictest confidence and kept securely.

Note: Your doctor may charge a fee for this report and it is your responsibility to meet these costs.

We will contact you if we need further details.

**PART 1**

**To be completed by ALL applicants:**

Name of applicant: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

National Health Insurance Scheme (NHIS) No: (Nigerian applicants)

\_\_\_\_\_

(Or foreign equivalent for applicant resident outside of Nigeria)

\_\_\_\_\_

Passport Number: \_\_\_\_\_

**REGISTERED WITH A LOCAL DOCTOR**

Upon successful admission to CFI, overseas students are required to register with a local doctor or school hospital:

Signed:



PART 2

VACCINATIONS AND X-RAYS

In the interest of health and safety all of our students are required to be immunized against diphtheria, tetanus, rubella, hepatitis B and polio. Immunization for tetanus and diphtheria must have been completed with the past ten years. Applicants must have also completed an oral polio series with the past ten years. A chest x-ray for tuberculosis within the past six months is also required. An immunization record endorsed by your doctor/registered medical practitioner must be sent to the CFI Registrar together with a report of the x-ray. Your student application cannot proceed until CFI has received these documents.

PART 3

THIS PART OF THE FORM MUST BE COMPLETED BY THE APPLICANT'S DOCTOR/REGISTERED MEDICAL PRACTITIONER:

What is the applicant's current state of health? _____ _____ _____
Does the applicant suffer from any condition (physical mental) or disease which may affect him/her while attending CFI? If so, please give details: _____ _____ _____
Is the applicant a wheelchair user or does he/she have mobility difficulties? If so, please give details: _____

Please mark YES next to any item below if positive.

Does the applicant have or has the applicant had...

- Malaria
- HIV/AIDS
- Bilharzias
- Cholera
- Dengue
- Diphtheria
- Hepatitis B
- Meningitis
- Poliomyelitis
- SARS
- Tetanus
- Tuberculosis
- Typhoid
- Yellow fever

If yes to any of the conditions overleaf please give details, including dates, frequency, duration and any medication prescribed where applicable. Continue on a separate sheet if required.

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**Declaration:**

I have given details that are true and complete to the best of my knowledge and belief.

I declare that the applicant is known to me personally/has been examined and investigated with the verification of identification (e.g. passport seen).

Signature of Doctor/registered medical practitioner:

Name (please print): \_\_\_\_\_

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

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Contact telephone No: \_\_\_\_\_

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

Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Office Stamp of the hospital: