



## Registration Form for WMI

“...fan into flame the gift of God, which is in you...” 2 Timothy 1:6

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| <b>Name:</b>   | <b>Telephone:</b>  |
| <b>Address including Postal Code:</b>  | <b>Cell Phone:</b>   |
| <b>Email:</b>  | <b>Where did you hear about WMI?</b>   |
| <b>Church Name &amp; Denomination:</b>   | <b>If you have attended your church for less than one year, where did you attend previously?</b>   |
| <p><b>I understand that my email address may be distributed to other students in the class and to instructors and used strictly for material related to the course.</b><br/> <b>Please initial here: _____</b></p> <p><b>I understand that my photo may be taken and used for the Graduation media presentation. Photos will not be sold or used outside of FEB Central without my written consent.</b><br/> <b>Please initial here: _____</b></p> | <p><b>For Office Use Only</b></p> <p>Date Application Received: _____</p> <p>Student ID: _____</p> <p>Paperwork Complete:                      Yes    No</p> <p>Registration Fee Received:              Yes    No</p> <p>Post-Dated Cheques Received:        Yes    No</p> |

### Registration Checklist:

Please check off each item to ensure it is included in your application packet. Do not send incomplete applications. See the following pages for detailed description of each item.

***Application must be received by August 31<sup>st</sup>***

- Spiritual history
- Testimony
- Serving Overview
- Becoming a Student of WMI
- Prior schooling or training experiences.
- Reference forms given to one Pastor or Ministry Personnel at your current church and one personal reference. Please list their names:  
     1) \_\_\_\_\_                                      2) \_\_\_\_\_
- Two post-dated cheques made payable to **FEB Central** \*please write WMI on the memo line of your cheque
- \$40 registration fee. Cheque made payable to **FEB Central** \*please write WMI on the memo line of your cheque
- Recent photo of yourself (a headshot)

**Spiritual History:**

How long have you attended your current church? \_\_\_\_\_

Do you regularly attend 2 or more services per month? \_\_\_\_\_

Are you a member of your church? \_\_\_\_\_

**Testimony:**

Type your name at the top of the paper. Write a 1-2 page (maximum), typed and double-spaced paper briefly outlining your spiritual journey. Include details about your conversion experience. Explain to the best of your ability what salvation through Jesus Christ means and what that has meant for your life.

**Serving Overview**

Do you serve in your local church as (circle all that apply)

Paid Staff

Lay Staff

Volunteer

Ministry Coordinator

Ministry Director

Deacon

Pastor's wife

Other: \_\_\_\_\_

Briefly list (point-form is fine) areas of ministry where you have served in the past 3 years \_\_\_\_\_

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

Have you mentored someone or been mentored? Explain. \_\_\_\_\_

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

What is your personal experience concerning:

1.) Personal Devotions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2.) Evangelism: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3.) Church Attendance / Involvement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Becoming a Student of WMI:**

Write a 1-page (maximum), typed and double-spaced paper briefly explaining why you wish to be a student of WMI.

**Prior Training:**

Please list (typed and double-spaced) any prior schooling/training you have had. List any schools (with majors and degrees or certificates) and also include any workshops, symposiums or seminars you have attended.

**Information included in my WMI application is true and accurate to the best of my knowledge.**

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

(If submitting electronically, please type or digitally sign your name above)

### Regarding Tuition Costs:

- Tuition cost is \$1400.
- Tuition is payable by two post-dated cheques dated for September 15 and February 15.
- **Cheques are made payable to FEB Central** (please write WMI on the memo line of your cheque) and must accompany your application. If you are submitting your registration electronically, cheques must be received within 10 days of receiving your application.
- WMI is not responsible for bank charges incurred because of an NSF cheque.
- Your tuition fees cover the cost of
  - Binder
  - Handbook
  - Journal
  - Course outline and assignment guidelines
  - Classroom instruction
  - Lunch and break refreshments
  - Marking of course assignment & follow-up by instructor (as needed)
  - Biweekly tele-coaching
  - Graduation
- Tuition fees do *not* cover the cost of textbooks (required reading) for each course or long-distance telephone costs for the coaching calls.

**Regarding Reference Forms:** Reference forms are to be given to two people: one to a Pastor or Ministry Personnel from your local church, and one to a personal reference.

- Enter your name at the top of each Reference form.
- Initial that you waive your right to view the completed reference, in the top right hand corner of the reference form.
- References are not to be completed by a close relative (example: parent, sibling, uncle, cousin, grandparent, spouse).
- Pastoral/Ministry reference: someone in ministry who has known you for at least one year.
- Personal reference: This reference should be from a mature adult, at least 21 years of age, who has known you for at least one year and who is not related to you.
- These references are confidential and as such should not be returned to you. Provide stamped, addressed envelopes for their return to **FEB Central – WMI Registrar, 175 Holiday Inn Dr Cambridge ON N3C 3T2** and distribute them to your referees. If submitting electronically, please ask your referee to put **your name** in the subject line of their email.



I waive my right to view the completed reference form.  
Applicant please initial here: \_\_\_\_\_

**Reference Form**

Applicant's name: \_\_\_\_\_ Date: \_\_\_\_\_

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

**Instructions:**

**Applicant:** Please print your name and address above. Please give: one copy to a Pastor or a ministry leader of your local church **and** one copy of this form to a personal reference. **Initial at the top of each form that you waive your right to view this completed reference form.** Provide stamped addressed envelopes for your references to return forms to WMI Registrar.

**Referee:** Please answer the following questions and the Personal Knowledge Matrix to the best of your ability. The information you provide will be held in strict confidence. When completed, mail directly to **FEB Central – WMI Registrar, 175 Holiday Inn Dr Cambridge ON N3C 3T2.** You may submit electronically by emailing to [wmi@febcentral.ca](mailto:wmi@febcentral.ca) and using the applicant's name in the subject line of your email.

**About the Applicant (to be completed by the Referee):**

How long have you known the applicant? \_\_\_\_\_

How well do you know the applicant?

- Casually       Fairly well     Very well

In what capacity?

- Work (employer, co-worker)       School       Friend  
 Church (Pastor / Ministry Personnel)     Other \_\_\_\_\_

What do you consider to be the applicant's greatest strength(s)? \_\_\_\_\_

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

What do you consider to be the applicant's greatest weakness? \_\_\_\_\_

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

WMI's vision is to "To encourage and equip women to grow deeper in their spiritual journey for effective leadership." Briefly describe areas where you feel the applicant demonstrates leadership skills and/or has leadership potential. \_\_\_\_\_

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Would you recommend the applicant for involvement in a course like WMI? Explain. \_\_\_\_\_

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Do you have reservations or concerns about this applicant's involvement in WMI? Explain. \_\_\_\_\_

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Thank you for completing this reference form. A member of the team may contact you to clarify details about the applicant. If you wish to provide additional information about the applicant you may contact the WMI Registrar at [wmi@febcentral.ca](mailto:wmi@febcentral.ca)

**About the Referee:**

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

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

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

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

Position / Title: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Personal Knowledge Matrix:**

Please place a check mark in the box the best describes the applicant and explain your rating.

|  | Excellent | Very Good | Good | Average | Below Average | Not Observed |
|--|-----------|-----------|------|---------|---------------|--------------|
| 1. Oral communication skills                                       |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 2. Written communication skills                                    |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 3. Interpersonal skills  |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 4. Leadership skills demonstrated                                  |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 5. Potential for leadership development                            |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 6. Applicant is teachable  |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 7. Positive personality  |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 8. Are Biblical principles evident in the applicant's daily life?  |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |
| 9. Does the applicant display a growing personal walk with Christ? |           |           |      |         |               |              |
| Comment:   |           |           |      |         |               |              |