



National Christian Counselors Association

ENROLLMENT AGREEMENT

I want to enroll in program number: 1 2 3 4 5

Name _____
(please print for certificate)

Social Security # _____ Date of Birth ____/____/____ yr. Male Female

Address _____
Street or P.O. Box U.P.S. Shipping Address

City State Zip City State Zip

Telephone: Home () _____ Work () _____

Cell () _____ Fax () _____ E-mail _____

Please Complete the Following Statements

I have been a Christian for _____ years. I graduated from high school in _____(year).

Course Supplemental
Format Preference

Did you graduate from college? Yes No If yes, give year, degree earned and major from:

DVD

(name of college or university)

Do you hold a Masters Degree? Yes No Name of College? _____
What was your Major? _____

Doctorate degree? Yes No Name of college? _____
What was your Major? _____

Have you ever been convicted of a felony? Yes No If yes, please explain in detail and attach.

Are you a licensed, commissioned or ordained minister? Yes No Year licensed/commissioned/ordained: _____

Denomination: _____

My current occupation is: _____

My spouse's name is: _____

Please respond (on a separate sheet) to the following questions and return with your Enrollment Agreement

1. Why do you want to be a counselor?
2. What formal/informal training in counseling have you had?
3. Why do you believe that this program will be of benefit to you?
4. Do you have experience in dealing with people with spiritual or emotional problems?
5. What are your goals for a counseling ministry?
6. How do you know that you are called/suited for the counseling ministry?

All candidates must provide the N.C.C.A. with the following prior to completion of program:

1. A copy of the highest diploma, certificate or degree earned and related transcript. Needs to accompany this application.
2. A current resume including any background in counseling or areas of interest in counseling and a recent photo.
3. Proof of Ordination or Minister's License in the form of a photocopy or official letter. (If applicable.)
4. Three reference forms (provided by N.C.C.A. with first course).
5. A letter of reference from your pastor or an elder in your church.

NOTE: The Candidate Evaluation Committee will not recommend anyone for certification or license whose student file is incomplete. N.C.C.A. will conduct a background check on all candidates prior to awarding the license.

The N.C.C.A. tries to be more than fair to the candidate who enrolls in a program and then, for some reason, needs to discontinue their candidacy. We certainly do not believe that an individual should be charged for a service, or for training, which they have not received. Therefore, we hope to exceed normal standards with regard to fairness toward our students as outlined herein.

The enrollment fee of \$75 will be refunded in full if the applicant is not admitted into the training program by the Evaluation Committee. However, once accepted as a candidate by the Evaluation Committee, the enrollment fee is non-refundable.

If a course is returned to the HopeWells Institute in good (resalable) condition within fifteen (15) days of the date that it was shipped, the entire tuition for the course, less a \$25 restocking fee, will be refunded within thirty (30) days from receipt of the course.

Please Tell Us How You Were Introduced to HW Institute

I completed the course Creation Therapy through S.A.C.C. (Directly) _____
Name of Representative or School

I first heard about the National Christian Counselors Association from:

- Internet T.V. Ad Radio Christian Magazine Pastor Friend
- Referred by (Name of Individual) _____
- Other (Please Specify) _____

I have read, fully comprehend, and accept N.C.C.A.'s policies and procedures. I understand that before I can receive my certification or license, my entire tuition must be paid in full and that all required documents must be submitted.

_____ Date _____ Signature of Prospective Candidate

