

3D Training Center

APPLICATION FOR ADMISSION

a gap year ministry of DM2

Instructions / Check off when complete

- ☐ Applicant must be 18 years of age on or before Sept. 1 of application year.
- ☐ Type or print legibly. Fill in every section. Use "N/A" when not applicable.
- ☐ Read the entire DM2 doctrinal statement at www.3DTC.org
- ☐ Attach a passport/ID size photo.
- ☐ Attach photocopy of your driver's license or government issued ID
- ☐ Secure two personal recommendations, to be sent directly to admissions.
- ☐ Secure pastor's recommendation, to be sent directly to admissions.
- ☐ Attach official high school transcript, GED, or equivalent.
- ☐ Pay \$25.00 Application Admission Fee online at www.3DTC.org
Use "GIVE" button and include note: "admission fee for: **YOUR NAME**"
- ☐ Send application by mail to: Disciple Makers Multiplied - 3DTC
PO Box 7758, Beaumont, TX 77726

Office use only:

Affix here:
passport size
Photo or JPG

ABOUT YOU

☐ Male ☐ Female

Last Name

First Name

Middle Name

Maiden Name

Home Street Address

City

State

Zip Code

Social Security Number

Date of Birth

Driver's License No.

State

Attach copy of DL or Gov. ID

CONTACT INFORMATION

(____) _____ - _____ (____) _____ - _____
Your Home Phone Number Your Cell Number Your Email

EMERGENCY CONTACT

Name _____ Relation _____ Phone Number (____) _____ - _____ Email _____

MARITAL STATUS

(____) Single (____) Engaged (____) Married (____) Remarried (____) Divorced (____) Widow/Widower (____) Separated

Do you have any dependents: (____) Yes (____) No If yes, list and describe situation _____

CITIZENSHIP

City/Country of Birth: _____ Country of Citizenship: _____

HIGHEST EDUCATION COMPLETED

(____) GED (____) High School Diploma (____) College ____ 1 ____ 2 ____ 3 ____ 4 (____) Bachelor (____) Master (____) Doctorate (____) Other _____

____ I am submitting proof of high school transcript/GED/equivalent

EDUCATION HISTORY (Most current first)

Name of School

City

From/To

Type of Diploma/Degree

Have you ever been expelled, dismissed or suspended from any school, college, or seminary (____) YES (____) NO
Explain: _____



EMPLOYMENT (List most current)

Employer: _____

Job Title: _____

Duties: _____

Are you currently employed (☐) YES (☐) NO Have you ever been fired or terminated (☐) YES (☐) NO

If yes, explain reason(s) why: _____

FINANCES

I have outstanding loans. (☐) YES (☐) NO

I have outstanding student loans. (☐) YES (☐) NO

I am aware that while I attend the Training Center for Disciple Makers, I may have to continue to pay any previous student loans. (☐) YES (☐) NO

I am aware that due to the intensity and hours involved I will not be able to hold a job during the school year. (☐) YES (☐) NO

I have financial obligations that may hinder me from attending the Training Center for Disciple Makers or paying my obligations. (☐) YES (☐) NO

Explain here how you intend to finance your education with 3D Training Center. _____

CHURCH AFFILIATIONS

In the past 5 years how many churches have you attended? _____ Name of local church you presently attend _____

Do you faithfully attend your church? _____ Name of your previous church: _____

Address of your church: _____ Church email: _____

Denomination: _____ Pastor's Name _____ Church phone: (_____) _____ - _____

Pastor's phone: (_____) _____ - _____ Pastor's Email _____

EXPLAIN WHY YOU DESIRE TO ATTEND (Use additional paper as needed)

DECLARATION

_____ I have read the DM2 doctrinal statement (posted on www.3DTC.org) and I am willing to come as a student fully aware of DM2's (3DTC) doctrinal positions.

(Note: You **do not** have to agree with the doctrinal statement to attend).

_____ I understand that the Training Center for Disciple Makers is **not accredited** and will not seek to become accredited, and that I will be issued a non-accredited diploma upon satisfactory completion of this one-year program.

_____ I am not presently under **Church discipline** from any local church.

_____ My pastor is aware of my training plans with TCDM.

_____ I declare that the information provided in this entire application is accurate and true to the best of my knowledge. (☐) YES (☐) NO

Signature: _____ Date: _____

3D Training Center

Pastor Recommendation Form



Instructions

For the Applicant: Please ask your pastor to complete this form and mail it directly to the Admissions Office at the following address:

3D Training Center, PO Box 7758, Beaumont, TX 77726

For the Pastor: The applicant listed below is applying for admission to the **3D Training Center**, an intensive one-year program of Disciple Makers Multiplied designed to prepare young adults for a life of service to Jesus Christ.

Thank you for your prayerful and honest evaluation of the applicant and your timely submission of this form. All information will be kept confidential and will not be shared with the applicant. Once you have completed the form please mail it directly to us; do not return it to the applicant. **Thank you.**

Office use only:

Name of Applicant: _____
Last Name
First Name
Middle Name

Your Name _____ Your Title _____

Church _____ Your phone _____ Your Email _____

Church Address _____
Street
City
State
Zip

How long have you known the applicant? _____ **How long has he/she attended your church?** _____

How well do you know the applicant? (choose only one): _____ Very close/personal relationship
 _____ Fairly well/many interactions _____ Casually/few personal contacts _____ By name and sight only

Additional comments: _____

To your knowledge, has the applicant trusted in Christ as Savior? _____ Yes _____ No _____ Not sure

Is the applicant faithful in attending church meetings? _____ Yes _____ No _____ Not sure

Is the applicant engaged in church? _____ Yes _____ No _____ Not sure

Do you believe the applicant is enthusiastic about his/her faith? _____ Yes _____ No _____ Not sure

Do you know if the applicant is involved in Christian service? _____ Yes _____ No _____ Not sure

Do you know if applicant is reliable to pay debts and keep word? _____ Yes _____ No _____ Not sure

Please give additional comments on any of the above questions: _____

Do you have any doctrinal concerns or warnings you would like to share concerning the applicant? _____

What can you tell us about the applicant's participation in the local church? _____

Please give your thoughts about the applicant's spiritual development and potential as a believer: _____

Are there any issues or needs that might impair the applicant's relationship with others? ____ Yes ____ No

If so, please explain: _____

To your knowledge is the applicant free of addictions? ____ Yes ____ No ____ Not sure

Please explain what you know: _____

Are you aware of anything that may negatively affect the applicant's participation in school or dorm life?

If yes, please explain: _____

To your knowledge has the applicant ever been accused of any of the following:

Child abuse? Yes ____ No ____ Crimes involving or against minors? Yes ____ No ____

Accusation of sexual molestation of a minor? Yes ____ No ____ If yes to any, please share what you know:

| Please rate the applicant on each of the following: | Excellent | Average | Poor | Unknown |
|--|-----------|---------|------|---------|
| Reliable , dependable, responsible | | | | |
| Mature , able to cope with life situations | | | | |
| Emotionally stability , reaction to stress, poise, mood stability | | | | |
| Motivated , genuine, and committed | | | | |
| Good judgment , able to analyze and solve problems | | | | |
| Oral expression , clear, coherent | | | | |
| Relationship with others , good rapport, cooperative, malleable | | | | |
| Empathy , sensitivity to the needs of others | | | | |
| Leadership , creative and decisive, self-confident | | | | |
| Personal appearance , clean, well groomed | | | | |
| Integrity , honest, of good moral character | | | | |
| Work habits , good stamina, polite, conscientious, takes initiative | | | | |

Please include any additional information that might be helpful for us to know about the applicant:

I, Pastor _____, make the following recommendation regarding
(Print Your Name Above)

the admission of _____ to the Disciple Makers Multiplied 3D Training Center:
(Print Applicant's Name Above)

(choose only one) ____ recommend, ____ recommend with reservation, ____ decline to recommend

3D Training Center

Personal Recommendation Form



Instructions

For the Applicant: Ask someone you trust and know well to complete this form. This person must not live with you or be a member of your family. Ask them to mail the completed form directly to the Admissions Office at the following address: **3D Training Center, PO Box 7758, Beaumont, TX 77726**

For the Personal Reference: The applicant listed below is applying for admission to the **3D Training Center**, an intensive one-year program of Disciple Makers Multiplied designed to prepare young adults for a life of service to Jesus Christ. Thank you for your prayerful and honest evaluation of the applicant and your timely submission of this form. All information will be kept confidential and will not be shared with the applicant. Once you have completed the form, please mail it directly to us; do not return it to the applicant. **Thank you.**

Office use only:

Name of Applicant: _____
Last Name
First Name
Middle Name

How do you know the applicant? _____ How long have you known each other? _____ Do you know how long he/she has attended local church? _____

How well do you know the applicant? (choose only one): _____ Very close/personal relationship
 _____ Fairly well/many interactions _____ Casually/few personal contacts _____ By name and sight only

Additional comments: _____

To your knowledge, has the applicant trusted in Christ as Savior? _____ Yes _____ No _____ Not sure

Is the applicant faithful in attending his/her local church? _____ Yes _____ No _____ Not sure

Is the applicant engaged in church? _____ Yes _____ No _____ Not sure

Do you believe the applicant is enthusiastic about his/her faith? _____ Yes _____ No _____ Not sure

Do you know if the applicant is involved in Christian service? _____ Yes _____ No _____ Not sure

Do you know if applicant is reliable to pay debts/is trustworthy? _____ Yes _____ No _____ Not sure

Please give additional comments on any of the above questions: _____

If you were asked to describe what the applicant is like, what would you say? _____

In your opinion, what are the applicant's strengths? _____

Please comment about the applicant's weak points: _____

Are there any issues or needs that might impair the applicant's relationship with others? _____ Yes _____ No

If so, please explain: _____

To your knowledge is the applicant free of addictions? ☐ Yes ☐ No ☐ Not sure

Please explain what you know: _____

Are you aware of anything that may negatively affect the applicant's participation in school or dorm life?

If yes, please explain: _____

To your knowledge has the applicant ever been accused of any of the following:

Child abuse? Yes ☐ No ☐ Crimes involving or against minors? Yes ☐ No ☐

Accusation of sexual molestation of a minor? Yes ☐ No ☐ **If yes to any, please share what you know:**

| Please rate the applicant on each of the following: | Excellent | Average | Poor | Unknown |
|--|-----------|---------|------|---------|
| Reliable , dependable, responsible | | | | |
| Mature , able to cope with life situations | | | | |
| Emotionally stability , reaction to stress, poise, mood stability | | | | |
| Motivated , genuine, and committed | | | | |
| Good judgment , able to analyze and solve problems | | | | |
| Oral expression , clear, coherent | | | | |
| Relationship with others , good rapport, cooperative, malleable | | | | |
| Empathy , sensitivity to the needs of others | | | | |
| Leadership , creative and decisive, self-confident | | | | |
| Personal appearance , clean, well groomed | | | | |
| Integrity , honest, of good moral character | | | | |
| Work habits , good stamina, polite, conscientious, takes initiative | | | | |

Do you recommend this applicant for acceptance to the 3D Training Center, a one year gap program of Disciple Makers Multiplied? ☐ Yes ☐ No

Please include any additional information you would like to share about the applicant: _____

Please print the following:

Your Name _____ Your Phone _____

Your Address _____
Street City State Zip

Name of Church You Attend _____ Your Email _____

Your signature: _____ **Date:** _____

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Office use only:

Name of Applicant: _____
Last Name
First Name
Middle Name

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How well do you know the applicant? (choose only one): _____ Very close/personal relationship
 _____ Fairly well/many interactions _____ Casually/few personal contacts _____ By name and sight only

Additional comments: _____

To your knowledge, has the applicant trusted in Christ as Savior? _____ Yes _____ No _____ Not sure

Is the applicant faithful in attending his/her local church? _____ Yes _____ No _____ Not sure

Is the applicant engaged in church? _____ Yes _____ No _____ Not sure

Do you believe the applicant is enthusiastic about his/her faith? _____ Yes _____ No _____ Not sure

Do you know if the applicant is involved in Christian service? _____ Yes _____ No _____ Not sure

Do you know if applicant is reliable to pay debts/is trustworthy? _____ Yes _____ No _____ Not sure

Please give additional comments on any of the above questions: _____

If you were asked to describe what the applicant is like, what would you say? _____

In your opinion, what are the applicant's strengths? _____

Please comment about the applicant's weak points: _____

Are there any issues or needs that might impair the applicant's relationship with others? _____ Yes _____ No

If so, please explain: _____

To your knowledge is the applicant free of addictions? ____ Yes ____ No ____ Not sure

Please explain what you know: _____

Are you aware of anything that may negatively affect the applicant's participation in school or dorm life?

If yes, please explain: _____

To your knowledge has the applicant ever been accused of any of the following:

Child abuse? Yes ____ No ____ Crimes involving or against minors? Yes ____ No ____

Accusation of sexual molestation of a minor? Yes ____ No ____ If yes to any, please share what you know:

| Please rate the applicant on each of the following: | Excellent | Average | Poor | Unknown |
|--|-----------|---------|------|---------|
| Reliable, dependable, responsible | | | | |
| Mature, able to cope with life situations | | | | |
| Emotionally stability, reaction to stress, poise, mood stability | | | | |
| Motivated, genuine, and committed | | | | |
| Good judgment, able to analyze and solve problems | | | | |
| Oral expression, clear, coherent | | | | |
| Relationship with others, good rapport, cooperative, malleable | | | | |
| Empathy, sensitivity to the needs of others | | | | |
| Leadership, creative and decisive, self-confident | | | | |
| Personal appearance, clean, well groomed | | | | |
| Integrity, honest, of good moral character | | | | |
| Work habits, good stamina, polite, conscientious, takes initiative | | | | |

Do you recommend this applicant for acceptance to the 3D Training Center, a one year gap program of Disciple Makers Multiplied? ____ Yes ____ No

Please include any additional information you would like to share about the applicant: _____

Please print the following:

Your Name _____ Your Phone _____

Your Address _____
Street City State Zip

Name of Church You Attend _____ Your Email _____

Your signature: _____ Date: _____