

New Life University Life Coaching Certification Enrollment Application

1102 Dow Street Murfreesboro, TN 37130

Please type or print. Mail your entire packet to the address above. Submit application with \$100 application fee.

Name:				
Street Address:				
City:	State:	Zip Code: _		
Best Contact Number:		Email Addre	ss:	
Social Security Number: _ (New Life University o				Gender: M F race, sex, or national origin.)
Highest Earned Degree: _				
Place and Date of High So	chool Diploma: _			
Place and Date of College	Credits Earned:			
Place and Date of Gradua	te Credits Earned	l:		
Place and Date of Post-G	raduate Work:			
Do you profess a relations	ship with Jesus C	hrist?		
Are you a credentialed mi	nister?			
With what church or deno	mination?			
Current Occupation:				
How long have you been	at your current jo	b?		
Marital Status: Married	Single	_ Divorced	Widowed	_
Spouse's name:				
Children's Names:				
Have you had any previou	us training in Chr	istian Counseling	? Please explain	
——————————————————————————————————————	g in personality o	r temperament tes	sting?	

Please Answer Briefly: Why do you want to be a Life Coach?	
How do you feel this program will benefit you?	
What are your goals for a Life Coaching minist	ry?
Have you ever been convicted of a felony?	Please explain:
Do you have any physical or emotional issues t	hat should be considered?
How did you become aware of NLU?	
Applicant signature:	Date: