

Pre-College Information Form

Name: _____ Date of Birth: _____

E-Mail: _____ Phone #: _____

High School Attending: _____ Expected Graduation Date: _____

Church Affiliation: _____ College/University Considering: _____

What are your future career and/or ministry goals?

Would you be interested in receiving information from ACGC provided to college students? (ministry opportunities, scholarship information, internship opportunities, etc.)

YES

NO

Are there any ways that ACGC can assist you as you begin to look at your future educational, career and ministry plans (please explain)?
