



**Jacksonville Theological Seminary**  
**National Christian Counselors Association**  
**DEGREE / LICENSING PROGRAM**  
**DOCTOR OF CLINICAL CHRISTIAN COUNSELING**

All questions regarding this program should be directed to our

Clinical Advisor

Dr. Lillie Swindle

901-428-1129

**JACKSONVILLE THEOLOGICAL SEMINARY**

**&**

**National Christian Counselors Association**

**CLINICAL STUDIES DEGREE PROGRAM**

**CLINICAL GRADUATE PROGRAM**

**DOCTOR OF CLINICAL CHRISTIAN COUNSELING**

**N.C.C.A. LICENSING**

**\*\*\*PLEASE NOTE THAT N.C.C.A. REQUIRES BACKGROUND CHECKS FOR LICENSING. THERE WILL BE AN ADDITIONAL \$100.00 NEEDED FOR THIS.\*\*\***

**Dr. Lillie Swindle  
Counseling Advisor**

**Dr. Iris Page  
Supervisor**

## **LICENSING INFORMATION**

The N.C.C.A.'s Licensing Board of Examiners offers several licensing categories. The category for which one qualifies will depend on educational background and experience as well as one's ministerial credentials.

### **Licensing categories include:**

#### **Licensed Clinical Christian Counselor**

(The above license titles are for those who hold a Master Degree and Ministerial credentials, both require the same program of study.)

#### **Licensed Clinical Christian Counselor-Advanced Certification**

(The above license titles are for those who hold a Doctorate degree and Ministerial credentials both require the same program of study.)

**\*NOTE\* This license is not a state license. State licensing must be applied for on an individual basis.**

**N.C.C.A. requires 12 CEUs a year to maintain license. JTS will provide the N.C.C.A.'s CEU courses at a fee of \$250.00 each (2 courses meet 12 CEU requirements). CEU courses taken through JTS will be added to transcript as Post Graduate work. CEUs may also be obtained through other means and transferred to N.C.C.A. for a transferal fee. This information may be obtained through the J.T.S. Clinical Supervisor.**

### **Refund Policy**

1. If a student withdraws from school or drops a class in writing within thirty (30) days of date of registration for a course, **JTS** will refund all tuition charges. (If a Temperament Analysis Profile has been done on student, this will be deducted.)
2. If a student withdraws from school or drops a course between thirty-one (31) and sixty (60) days, and has a passing grade when dropped, 50% of the relevant tuition charges will be refunded.
3. **No** refunds on tuition are allowed on **any** withdrawal after sixty (60) days, or for students who are dismissed by the administration, or who withdraws with a failing grade.
4. **There will be no refunds on material charges.**

## **INFORMATION FOR ALL J.T.S. / N.C.C.A. CLINICAL PROGRAMS**

**There will be an additional \$100.00 required for a background check before license is issued and a \$50.00 fee for first year's membership with N.C.C.A. Cost of program is subject to change without notice due to occasional increase in materials from N.C.C.A.**

\*Please note: Because of varying State Laws we advise each student to contact his/her particular State Licensing Office regarding licensing requirements for ordained Christian counselors.

N.C.C.A. Licensed counselors are free to counsel under their local church covering without charging a fee. Obtaining an NPI number and business license will allow counselors to charge a fee and/or open their own counseling ministry. Information about this can be obtained through our clinical advisor Dr. Lillie Swindle.

**Mal-practice insurance is highly recommended and may be obtained through The American Professional Agency. For application call: (613)691-6400. You will apply under Clergy and Pastoral Counselor title.**

**APS's counselor reports required with each of twenty-five (25) APS**

**CLINICAL tests given.**

**You are asked to complete at least one phase every four (4) months.** If more time is required you must contact your supervisor for an extension. **Please Note:** Students who become inactive or do not complete their courses within expected and reasonable time frame will be subject to **any and all** changes made in program or program fees.

**There will also be a \$25.00 fee for retesting payable when a second test is sent for grading. \*N.C.C.A. Fees are subject to change without notice.**

## **TRAINING FOR CHRISTIAN COUNSELORS**

There is a current need in Christianity for Christian counselors to be properly trained and credentialed. This has become more evident as counselors begin to appear all over the world. This training certification and licensing programs, being offered through J.T.S. will meet this need.

J.T.S., through N.C.C.A., offers training to Christian pastors, professionals, and laity in Temperament Theory and Therapy. Temperament Theory and Therapy is a Christian counseling method based on the biblical view that man is directly created by God, in His image, not through an evolutionary process. This therapeutic method was developed during seven years of research. The research involved five thousand (5,000) individuals who were seeking help for their problems. The research concluded that the outcome of treatment is over ninety percent (90%) successful when Temperament Therapy is administered by a qualified Temperament Therapist.

The success of Temperament Therapy is based on two concepts. First, it is a biblically based system. Second, its therapeutic approach "targets" the source of the counselee's problem(s). Temperament Therapy provides a session-by-session plan for counseling.

## **TEMPERAMENT THERAPY**

Temperament Therapy is a therapeutic method developed by Christians for the Christian community. It is currently being used by pastors, professional counselors and laity throughout the United States and several foreign countries.

The N.C.C.A.'s therapeutic procedure is unique. The counselor administers a questionnaire which takes the counselee less than ten minutes to complete. The questionnaire is then sent to the counselor's supervisor for analysis. The counselor receives a completed profile explaining the individual's needs and traits. The profile also provides the counselor with specific information and suggestions which are important when counseling that particular individual. This is based upon the principle that each individual is uniquely created in the image of God, and therefore, will respond to his or her particular circumstances in a different way. This process will help the counselor save time in developing a treatment program for his/her counselee.

# **OUTCOME ASSESSMENT AND BENEFITS DERIVED FROM THE TRAINING**

Of course, the main benefit is that of knowledge and how to relate to others. This knowledge is valuable in every area of life, including the desire to help those who are hurting.

In addition to knowledge, having this license may open doors to operate a counseling ministry under the authority of a church organization. This would make it possible to collect fees and receive remuneration for the services rendered.

Having N.C.C.A. credentials will ensure recognition within the community as a qualified Christian counselor. The community can be assured that the credentials are authentic and current because of involvement in continuing education and accountability to the professional review board organized on national and state levels by N.C.C.A.

Also, to be enjoyed is the benefit of being part of an association which provides networking on one's counseling efforts.

**DOCTOR of CLINICAL CHRISTIAN COUNSELING  
CHRISTIAN COUNSELOR'S TRAINING / LICENSING PROGRAM**

**Program Fee \$4850.00**

Courses to be taken in the following sequence:

	Courses
Phase I	Creation Therapy 25 Temperament Analysis Profiles
Phase II	The Gifts & The Calling of God The First 48 Hours
Phase III	Basic Christian Counseling Christian Counseling: Integrating Temperament & Psychology
Phase IV	Mastering Pastoral Counseling Counseling the Co-dependent
Phase V	Crisis Counseling for Pastors & Professionals Blame it on the Brain
Phase VI	Quality Ethics and Legal Issues in Christian Counseling Temperament Case Studies Dissertation

**Payment Schedule:**

\$808.50 with application

\$808.50 at completion of phase I

\$808.50 at completion of phase II

\$808.50 at completion of phase III

\$808.50 at completion of phase IV

\$807.50 at completion of phase V

**Additional Requirements**

1. Answer 50 Board Examiner Questions
2. Provide a Copy of your degree
3. Give a current resume including the answer to 6 N.C.C.A. questions on enrollment form (background in counseling or areas of interest in counseling).
4. A recent picture of yourself.
5. Proof of ministerial credentials in form of a copy or official letter.
6. Letter of reference from your pastor or elder, as well as three additional letters of reference stating the recognition of the call to counsel on your life.
7. Background check \$100.00(This is done through NCCA)
8. First year membership dues for NCCA \$75.00

Please note\* All financial requirements must be met prior to receiving the next phase courses. Due to varying State Laws you are advised to contact your particular State Licensing Offices regarding licensing requirements for those holding ministerial credentials.

Contact: Dr. Lillie Swindle at (901) 428- 1129, for further information.

Please return the application with your check, money order or credit card information to:

**Jacksonville Theological Seminary 1709 St. Johns Bluff Rd. North Jacksonville, Fl. 32225**

To expedite receipt of courses please send a check, money order or complete the credit card charge request. All financial requirements must be met before next phase courses are sent. All financial & program requirements must be met before license or degree is issued.

\*Fees subject to change

**If student has taken any of the program courses additional courses will be substituted to complete the requirement.**

**Temperament Case Studies requires student to write their own Case Study using one of the individuals who has received APS & has been counseled. Student must follow a format used in course book when writing case study.**

**All APS tests will require counselor's reports.**



**Clinical Christian Counseling Program Instructions**  
**Doctoral Level**

Please do courses in order listed below. You have 2 months to complete each course. If you need an extension **you must** contact your supervisor or you may be put on the inactive list and be penalized. If using information in your written work that comes from outside sources please list these sources in bibliography. **All work must be typed 14 font/double spaced and in students own words (what I learned, how I will use it in my counseling, how beneficial I found information, etc.) Student's paper will be graded on content & grammar.**

<b>Course</b>	<b>Requirements</b>
Creation Therapy 25 Temperament Analysis Profiles	Textbook with 1 proctored exams, 200 Question Test
The Gifts & The Calling of God	12 audio lessons with 100 Question Test, Outline, Essay and Book Report
The First 48 Hours, Blame It on The Brain, Crisis Counseling for Pastors & Professionals	Textbook with 100 Question Test, Outline, Essay and Book Report
Christian Counseling: Integrating Temperament & Psychology, Mastering Pastoral Counseling, Basic Christian Counseling, Counseling the Co-dependent, Quality Ethics & Legal Issues in Christian Counseling	Textbook with 1 proctored exams, 100 Question Test
Temperament Case Studies	Write a case study on one of the people you have given the APS & have seen for at least 3 counseling session using a similar format from textbook. Submit to supervisor for grading.
Dissertation	<p>Doctoral Project: In addition to the above prescribed course of study, you will be required to submit a Dissertation in MLA format, consisting of ten outside sources. The Dissertation is to have a minimum of seventy-five and a maximum of one hundred typewritten (double-spaced) pages. The Dissertation should relate to your degree field and <u>may be turned in at any time.</u></p> <p><b>NOTE: The project subject and a brief description must be submitted and pre-approved by the Academic Dean*(This should be done as soon as possible)</b></p>

# **N.C.C.A.**

## **Faith-Based Board Certification Areas**

### **Available Through JTS**

#### **Integrated Marriage & Family Therapy**

1. Marriage & Family Counseling  
(An integrated approach)
2. Integrated Temperament Couple Therapy
3. Pre-Marriage Counseling With Temperament
4. The Father-Daughter Connection

#### **Child & Adolescent Therapy**

1. Counseling Families
2. Counseling & Children
3. Counseling Youth
4. Counseling & the Search for Meaning

#### **Substance Abuse & Addiction Therapy**

1. Counseling for Substance Abuse & Addiction
2. Counseling Adult Children of Alcoholics
3. Counseling for Problems of Self-Control
4. Counseling Those With Eating Disorders

#### **Board Certified Temperament Therapist**

1. Temperament Case Studies
2. Life's Answers Through Counseling With God
3. Living in the Spirit — Utilizing Temperament
4. Counseling the Codependent: A Christian Perspective Utilizing Temperament

#### **Sexual Therapy**

1. Counseling for Sexual Disorders
2. Counseling & Homosexuality
3. Counseling for Problems of Self-Control
4. Counseling for Unplanned Pregnancy & Infertility

### **Death & Grief Therapy**

1. Counseling the Sick & Terminally Ill
2. Counseling for Anger
3. Joy in the Midst of Mourning
4. Counseling Families of Children with Disabilities

### **Cognitive Therapy & Ethics**

1. Cognitive Therapy Techniques
2. Life's Answers Through Counseling with God
3. Quality, Ethics, & Legal Issues In Christian Counseling
4. Innovative Approaches in Counseling

### **Crisis & Abuse Therapy**

1. Counseling for Family Violence/Abuse
2. Counseling in Times of Crisis
3. Counseling for Anger
4. Counseling the Depressed

### **Domestic Violence & Intervention Therapy**

Applicant must hold a Doctorate degree or higher, be licensed by N.C.C.A. and be Board Certified in Crisis & Abuse Therapy as well as completing the following five courses:

1. Temperament Case Studies
2. Counseling for Substance Abuse & Addiction
3. Counseling for Problems of Self-Control
4. Counseling Families
5. Counseling & Self-Esteem

### **Group Therapy**

Applicant must hold a Doctorate degree or higher, be licensed by N.C.C.A. and be Board Certified in Integrated Marriage & Family Therapy in order to qualify for this specialty area of Board Certification. Then, he/she must complete one additional course titled Group Therapy.

# Requirements & Information for The Clinical Christian Counseling Program

## **Please Read Carefully**

### **The Following Items Will Be Required With Application:**

A spiritual resume stating your salvation experience & date, call to the counseling ministry, and vision for future ministry.

As you complete each course please send for grading. **You will be allowed two months to complete a course if you need more time you must call for an extension.**

Upon completion of your program you must apply for Mal-practice insurance under **clergy** title.

Ministerial credentials will be required for NCCA licensing.

**PLEASE NOTE:** The following items will be needed **before** you complete the program.

### **Questionnaire For Enrollment**

Please respond to the following questions numbering each question and adding to your resume.

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

### **Additional Requirements**

1. Official transcripts of all previous degrees.
2. A current resume including any background in counseling or areas of interest in counseling.
3. A recent photo (head and shoulder shot if possible).
4. Proof of Ordination or Minister's License in the form of photo copy or official letter.
5. You are also required to administer 25 clinical APS submitting reports on each reports on each
6. Answer 50 Board Questions
7. \$100.00 background check fee.

**All the above must be submitted to the Corporate Office.**

# **JACKSONVILLE THEOLOGICAL SEMINARY**

1709 St. Johns Bluff Road North  
Jacksonville, FL 32225  
(904)786-5383 Fax (904) 695-9742  
*Listen-Read-Be Educated-Be Equipped*

\_\_\_\_\_  
**NAME OF FACILITATOR (NOT the Ministry)**

## **APPLICATION FOR ADMISSION**

I hereby request application to Jacksonville Theological Seminary (JTS); whereby, I may “study to show myself approved to God, a workman that need not be ashamed.” I submit myself to the Lordship of Jesus Christ, my Lord, and my Savior. I submit this application to Jacksonville Theological Seminary in the witness of God and in obedience to His call upon my life. I hereby declare I will fulfill His “calling” upon my life, complete all studies as directed by the Lord and representatives of JTS and enter the harvest fields as a laborer for the GOSPEL MINISTRY of Jesus Christ.

**STUDENT ID #** \_\_\_\_\_ (School Use Only)

## **PLEASE PRINT LEGIBLY**

DATE OF APPLICATION: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

HOME PHONE NUMBER:(\_\_\_\_\_) \_\_\_\_\_ CELL PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_

(List all other last names used)

NAME OF APPLICANT: \_\_\_\_\_ (Dr., Pastor, Rev. Mr., Mrs., Ms.) \_\_\_\_\_  
(Last) (First) (MI)

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

*Your acceptance package will be emailed to you.*

- Please check this box if you would like to have access to the online program*
- Please check this box if you would like to order a Student ID Card (\$25.00)*
- Please check if you would like to receive e-books when available for the courses that require textbooks.*

PLEASE ENCLOSE GOVERNMENT IDENTIFICATION (Driver’s License/State ID Card)  
And RECENT PHOTO WITH A \$50.00 APPLICATION FEE (\$75.00 if requesting Student ID Card)

## **CLINICAL CHRISTIAN COUNSELING PROGRAM**

DOCTOR OF CLINICAL CHRISTIAN COUNSELING \_\_\_\_\_

## VOCATION & WORK HISTORY

*Please list your vocational and working history beginning with your most recent first, then back in years.*

**EMPLOYER'S NAME:** \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date Began: \_\_\_\_\_ Date Ended: \_\_\_\_\_

PLEASE DESCRIBE POSITION and TYPE(S) OF WORK PERFORMED: \_\_\_\_\_

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

**EMPLOYER'S NAME:** \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date Began: \_\_\_\_\_ Date Ended: \_\_\_\_\_

PLEASE DESCRIBE POSITION and TYPE(S) OF WORK PERFORMED: \_\_\_\_\_

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

**EMPLOYER'S NAME:** \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date Began: \_\_\_\_\_ Date Ended: \_\_\_\_\_

PLEASE DESCRIBE POSITION and TYPE(S) OF WORK PERFORMED: \_\_\_\_\_

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

**EMPLOYER'S NAME:** \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date Began: \_\_\_\_\_ Date Ended: \_\_\_\_\_

PLEASE DESCRIBE POSITION and TYPE(S) OF WORK PERFORMED: \_\_\_\_\_

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

**EDUCATION HISTORY:**

Please list your educational history, starting with the high school attended, then any vocational, college, university, Bible College, or Seminary studies completed. **If you have not completed a degree from any of the schools listed, please list the number of credit hours that you have completed from each school. Please do not list any educational history that you are unable to provide OFFICIAL DOCUMENTATION FOR.**

<b>NAME OF SCHOOL CITY AND STATE</b>	<b>YEARS ATTENDED</b>	<b>DEGREE/DIPLOMA CREDITS EARNED</b> <small>(Diploma, GED, AA, BA, MA, PhD, Th. D, etc.)</small>	<b>AREA OF STUDY</b>

**MILITARY HISTORY:**

BRANCH OF SERVICE: \_\_\_\_\_

YEARS OF SERVICE: \_\_\_\_\_ TOTAL YEARS SERVED: \_\_\_\_\_

COMMISSION UPON DISCHARGE: \_\_\_\_\_ STATUS OF DISCHARGE: \_\_\_\_\_

POSITION and DUTIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## CHURCH HISTORY:

Please complete the following information listed below regarding your relationship with Jesus Christ, the local church you attend, any positions or responsibilities you may be involved with to support your church (Pastor, Praise and Worship, Teacher, Nursery, Helps, etc.), and any other ministries you may support or be involved with; i.e. missions, evangelism, food banks, etc. Please continue using additional paper if necessary.

DATE YOU RECEIVED JESUS CHRIST AS YOUR LORD AND SAVIOR. \_\_\_\_\_

HAVE YOU BEEN WATER BAPTIZED? \_\_\_\_\_ DATE \_\_\_\_\_

NAME OF CHURCH YOU PRESENTLY ATTEND: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PASTOR'S NAME: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_

YEARS IN ATTENDANCE: \_\_\_\_\_ POSITION or RESPONSIBILITIES: \_\_\_\_\_

NAME OF CHURCH or MINISTRY YOU HAVE ASSISTED AS A LABORER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PASTOR'S NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

YEARS OF LABOR: \_\_\_\_\_ POSITION or RESPONSIBILITIES: \_\_\_\_\_

NAME OF CHURCH or MINISTRY YOU HAVE ASSISTED AS A LABORER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PASTOR'S NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

YEARS OF LABOR: \_\_\_\_\_ POSITION or RESPONSIBILITIES: \_\_\_\_\_

*I hereby state that all the information listed on this application is true and accurate as unto the Lord as my witness. I hereby grant permission to Jacksonville Theological Seminary to verify all the information listed above. I further agree to and understand that any and all "Earned" Life Credit Hours, Educational Credit Hours, and Ministry Credit Hours based upon this application are granted at the discretion of Jacksonville Theological Seminary. I hereby agree and understand that I will complete all course requirements as unto the Lord Jesus Christ, and I will comply with all Seminary Policies and Financial Commitments in pursuit of academic excellence in the Word of God. Amen.*

*I hereby further understand that all the courses and degrees of Jacksonville Theological Seminary are of an ecclesiastical nature and, whether granted or conferred, are in the restricted area of religion with the special purpose of preparing persons to work in the area of religion - whether Educational, Ministerial, or Counseling - and are **NOT** designed to be used in general academic circles.*

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE



***JACKSONVILLE THEOLOGICAL SEMINARY***  
**REQUEST FOR PREVIOUS SCHOOL RECORDS**

**PLEASE SEND AN OFFICIAL TRANSCRIPT OF MY RECORDS TO:**

***JACKSONVILLE THEOLOGICAL SEMINARY***

**1709 St. Johns Bluff Road North  
JACKSONVILLE, FLORIDA 32225**

**THIS RECORD IS REQUIRED BY JACKSONVILLE THEOLOGICAL  
SEMINARY TO COMPLETE MY ADMISSIONS FILE.**

---

LAST NAME                      FIRST                      MIDDLE                      MAIDEN                      OTHER LAST NAME

---

BIRTH DATE                      SOCIAL SECURITY NUMBER                      DATES ATTENDED OR GRADUATION DATE

---

CURRENT STREET ADDRESS                      TELEPHONE NUMBER

---

CITY                      STATE                      ZIP CODE

---

NAME OF HIGH SCHOOL/COLLEGE/SEMINARY ATTENDED OR GRADUATED FROM

---

ADDRESS: (STREET OR POST OFFICE BOX)                      CITY                      ZIP CODE

---

STUDENT SIGNATURE

**NOTE: FAILURE TO SUBMIT PROOF OF HIGH SCHOOL/COLLEGE/SEMINARY TRANSCRIPTS  
WILL BLOCK FUTURE REGISTRATION.**

**This Form Is to Be Mailed to Your Former Schools:  
MAKE COPIES AS NEEDED FOR ALL INSTITUTIONS**

**J.T.S. / N.C.C.A. FINANCIAL AGREEMENT  
DOCTOR OF CLINCIAL CHRISTIAN COUNSELING**

**Program Fee \$4850.00**

**PLEASE PRINT LEGIBLY**

NAME OF APPLICANT: \_\_\_\_\_ (Dr., Pastor, Rev., Mr., Mrs., Ms.) \_\_\_\_\_  
(Last) (First) (MI)

EMAIL ADDRESS: \_\_\_\_\_

Courses to be taken in the following sequence:

	Courses
Phase I	Creation Therapy 25 Temperament Analysis Profiles
Phase II	The Gifts & The Calling of God The First 48 Hours
Phase III	Basic Christian Counseling Christian Counseling: Integrating Temperament & Psychology
Phase IV	Mastering Pastoral Counseling Counseling the Co-dependent
Phase V	Crisis Counseling for Pastors & Professionals Blame it on the Brain
Phase VI	Quality, Ethics and Legal Issues in Christian Counseling Temperament Case Studies Dissertation

**Program Payment Schedule Follows:**

\$808.50 with application	\$808.50 at completion of phase III
\$808.50 at completion of phase I	\$808.50 at completion of phase IV
\$808.50 at completion of phase II	\$807.50 at completion of phase V

Please return this form and application with check, money order or credit card information to:

**Jacksonville Theological Seminary - 1709 St. Johns Bluff Rd. North Jacksonville, Fl. 32225**

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

# ***JACKSONVILLE THEOLOGICAL SEMINARY***

## **Credit Card Payment**

**Student's Printed Name:** \_\_\_\_\_

**Card Holder's Printed Name:** \_\_\_\_\_

**Credit Card Type:** Master Card \_\_\_\_\_ Visa \_\_\_\_\_ Other \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Total Charge Amount:** \_\_\_\_\_

**Date of Charge:** \_\_\_\_\_

**Billing Address Zip Code:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_