

CMM PROPHETIC SCHOOL

Student Application



Circle ALL that apply:		Mr.	Mrs.	Ms.	Miss	Pastor	Widow	Single Parent	Non U.S. Citizen
Name						Spouse			
Address						Home Phone			
City						Work Phone			
State						Fax			
Zip						Email			
Church						Occupation			Age

1. Have you read any prophetic books? If so, list those most influential to you.

2. What other prophetic ministries have you been interested in?

3. How long have you been a Christian?

Yrs

Date of Salvation

4. Please give a brief account of when and how you became a Christian.

5. How are you presently serving the Lord?

6. What is your primary reason for attending this school?

7. Are you a part of a prophetic ministry team at this time? If so, explain briefly.

Having accepted the school enrollment information and requirements outlined online, I respectfully submit my application. I agree to respectfully abide by the determination of the CMM Prophetic School course facilitator as to the suitability of my attendance at this time. I agree to indemnify and hold CMM and their staff and volunteers harmless for any of my personal responses to the teachings and small group ministry times during the school. I also agree to indemnify and hold CMM harmless for any costs in time, travel, accommodations, or other incidentals, should the school be canceled, my acceptance be delayed, or I am asked to discontinue the course to seek ministry before continuing at another time.

APPLICANT'S SIGNATURE

DAT E

PROPHETIC STUDENT SCHOOL COSTS

Student

☐ I choose to pay 50% now

☐ I choose to pay 100% now

Prophetic School Choice

☐ Prophetic Beginnings Class

☐ Advanced Prophetic Class

Please return this application and references with either 100% or at least 50% of your payment no later than August 20, 2025. Fees are \$500 per class. Late registrations will incur an additional \$50 fee. NO EXCEPTIONS

\$_____ Add \$50 late fee after August 20, 2025.

\$_____ My payment with this application.

\$_____ I owe first day of school September 2, 2025.

Payment can be made online by debit/credit card at www.cmm.world

Or if sending a check:

Make Checks Payable to:

CMM

PO Box 7705

Charlotte, NC 28241

Pastor Reference

CONFIDENTIAL — FOR PROPHETIC SCHOOL FACILITATOR USE ONLY

Student Applicant _____ is applying to attend an online CMM Facilitated Prophetic School. We would appreciate your candid assessment of this individual's character qualities and spiritual gifting. Your comments are important. Please return this character reference directly to the student in a sealed envelope.

1. How long have you known the applicant? _____ Years

2. In what areas has the applicant served in your church? Are they a member? ☐ Yes ☐ No

Present: _____

Past: _____

2. How would you evaluate the applicant in the following areas? (Circle number: 5 = strongest to 1 = weakest)

	HIGH		MEDIUM		LOW		DON'T KNOW
Humility	5	4	3	2	1		☐
Mournful over sin	5	4	3	2	1		☐
Gentle and Meek	5	4	3	2	1		☐
Seeks to do things God's way	5	4	3	2	1		☐
Merciful	5	4	3	2	1		☐
Pure in heart	5	4	3	2	1		☐
Peacemaker	5	4	3	2	1		☐
Self-controlled	5	4	3	2	1		☐
Heart for the lost	5	4	3	2	1		☐
Cares for others	5	4	3	2	1		☐
Integrity	5	4	3	2	1		☐
Overall Spiritual Maturity	5	4	3	2	1		☐

4. What areas in the applicant's life do you feel need development?

5. On a scale of 1 to 5, with 1 being the weakest and 5 being the strongest:

How would you rate the applicant's working relationship to people who are *in* authority over them? _____

How would you rate the applicant's working relationship to people who are *under* their authority? _____

6. Would you send someone "in need" to this person for ministry? ☐ Yes ☐ No (If not, please explain why on the back of this sheet.)

7. Do you recommend them to attend this Prophetic facilitated school? ☐ I recommend ☐ I recommend with this reservation ☐ I do not recommend

SIGNATURE

PHONE

DATE

PRINT NAME

POSITION

CHURCH / MINISTRY

CITY, STATE ,ZIP

(Please return to applicant in a sealed envelope.)

Student Character Reference

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Student Applicant _____ is applying to attend an online CMM Facilitated Prophetic School. We would appreciate your candid assessment of this individual's character qualities and spiritual gifting. Your comments are important. Please return this character reference directly to the student in a sealed envelope.

1. What is your relationship with the applicant? _____ **Length of relationship** _____ **Years**

2. How would you evaluate the applicant in the following areas? (Circle number: 5 = strongest to 1 = weakest)

	HIGH		MEDIUM		LOW	DON'T KNOW
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Mournful over sin	5	4	3	2	1	☐
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SIGNATURE

PHONE

DATE

PRINT NAME

RELATIONSHIP TO THE APPLICANT

CHURCH / MINISTRY

CITY, STATE ,ZIP

(Please return to applicant in a sealed envelope.)