



# The Bible School Jesus Heals and Restores

Application for School year 20\_\_\_\_ - \_\_\_\_

**Please fill in your information:**

Surname \_\_\_\_\_ First name (only given name) \_\_\_\_\_  
Civic registration number (year-month,day,number) \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
Address \_\_\_\_\_  
c/o \_\_\_\_\_  
Phone number \_\_\_\_\_ Country number \_\_\_\_\_  
Nationality \_\_\_\_\_  
Zip code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_  
E-Mail address (required!) \_\_\_\_\_

**Nearest relative:**  Father/Mother  Husband/ Wife  Other \_\_\_\_\_

Surname \_\_\_\_\_ First name \_\_\_\_\_  
E-mail \_\_\_\_\_  
Address \_\_\_\_\_  
Zip code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

**Your Occupation/Education** \_\_\_\_\_

**Describe how and when you became a Christian** \_\_\_\_\_ Year \_\_\_\_\_

**In what area/areas do you need healing, restoration and deliverance?**

\_\_\_\_\_

**Have you been active in prayer, counselling, healing or deliverance ministry?**

Not at all  A little  Some  A lot In what way? \_\_\_\_\_

**Do you have any function in your congregation?** \_\_\_\_\_

**Church Affiliation:** What denomination do you belong to? Write the name of the church which you currently attend.

Name of the pastor \_\_\_\_\_ Phone \_\_\_\_\_  
Name of the Church/Denomination \_\_\_\_\_ Country \_\_\_\_\_  
Address \_\_\_\_\_ Zip code \_\_\_\_\_ City \_\_\_\_\_  
Email address \_\_\_\_\_

**Statement and Signature:**

- I hereby certify that the information on this application is true and factual. I allow the Bible School to use my personal information for internal use.
- I allow the Bible School to register my personal information on computer for internal use. We register following information: Name, Date of birth, E-Mail address, phonenumber.

**Signature** \_\_\_\_\_

**Name in capital letters** \_\_\_\_\_

1. The application must be completed with a recommendation from a priest/ pastor/ spiritual leader

2. Send your application to:

The Arken Church  
JESUS HEALS AND RESTORES BIBLE SCHOOL  
Box 134  
S-196 23 KUNGSÄNGEN, SWEDEN

**E-Mail: [bibelskola@arken.org](mailto:bibelskola@arken.org)**