



leap

DISCIPLESHIP PROGRAM

SAN CLEMENTE
APPLICATION
FORM
2025

This Application Form is for prospective students who wish to apply for admission to the Leap Discipleship Program (“Leap”), a non-accredited ministry school based in San Clemente, USA, and in Wellington, South Africa and that provides ministry training, as well as accommodation and services to registered students. This application form is only for prospective students applying for Leap San Clemente.

APPLICATION PROCESS

The following steps are required to apply to Leap and for us to process your application:

Step 1: Applicants must complete and sign this Application Form and submit it via e-mail to: sanclemente@jgc-leap.com

Step 2: Once we have received the completed Application Forms, we schedule an interview with each Applicant. After conducting interviews and considering the Application Forms, Leap will finalize which Applicants will be accepted into their selected program. Please send in your application by November 29th, 2024.

Step 3: Leap will send successful candidate’s a Letter of Acceptance, via email, detailing further steps to be taken by those Students and confirmation of curriculum, accommodation, fees, and deposits required by Leap. Unsuccessful candidates will be notified.

Step 5: Ensure you have a valid passport or visa (if applicable).

Please note that the starting date and the semester for 2025 will be confirmed in the last quarter of 2024, and all applicants will be notified of these dates when they are available. The tentative start dates for 2025 are **February 13th, 2025, until the July 31st, 2025.**



Photo

First Name & Last Name: _____

Cellphone Number: _____

Instructions

We will not process an application until all attachments, supporting materials and application fee has been received.

1. Please answer all questions in the Application Form. Incomplete or illegible answers can delay the admission process.
2. Complete the form in ink block letters in English please.
3. Send your completed and signed Application to our email at: sanclemente@jgc-leap.com

A large, stylized logo for the Leap Discipleship Program. The word "Leap" is written in a thick, black, handwritten-style font with a horizontal line through the middle of the letters. Below the word "Leap" is the text "DISCIPLESHIP PROGRAM" in a bold, black, sans-serif font. The letter "p" in "Leap" has a long, horizontal tail that extends to the right.

Application forms for training & accommodation services from

Leap Discipleship Program (Leap)

for the 2025 academic year.

AGREEMENT FOR ALL APPLICANTS

LEAP, SAN CLEMENTE offers a unique, Christian, ministry program to foster the spiritual development of students, for the purpose of impacting the world for Christ. To ensure this environment is beneficial for all students, there are certain behavioral standards that guide the LEAP, SAN CLEMENTE community. The following examples of the LEAP COMMUNITY Standards are not exhaustive but are intended to give you an idea of what is expected of you, should you ultimately become a LEAP, SAN CLEMENTE student. Over the course of your time at LEAP, SAN CLEMENTE, you will be expected to:

- Follow Christ's example, love others, act unselfishly, and repent of sin as you become aware.
- Live with integrity, submit to biblical instruction, and accept responsibility for your actions.
- Refrain from dishonesty, theft, the use of illegal drugs, and any other illegal activity.
- Refrain from sexual behavior contrary to the Biblical Standards.
- Abstain from gambling and the use of tobacco products.

As a student at LEAP, SAN CLEMENTE, you are not expected to be a perfect person, but a person actively pursuing spiritual growth within a diverse community of Christian students. LEAP, SAN CLEMENTE leaders are eager to serve you and the community by providing support and accountability. As an organization, LEAP, SAN CLEMENTE reserves the right to refuse admittance and/or dismiss any person who does not abide by Biblical Standards or the principles, policies, and expectations of our community. LEAP, SAN CLEMENTE has a strong Christian commitment and requires that to be accepted, an applicant must also possess an active commitment to his or her own Christian faith.

LEAP, SAN CLEMENTE does not discriminate on the basis of race, color, national origin, gender, age, or disability in the admission of students, employment, or the educational programs and activities it conducts.

By signing this page, I have read, understood, and agreed to uphold the LEAP, SAN CLEMENTE Standards as summarized above, if I am accepted into LEAP, SAN CLEMENTE.

SIGNATURE OF APPLICANT: _____ DATE: _____

PERSONAL INFORMATION

Student Personal Information

First Name & Last Name: _____

Postal Address: _____

Cellphone: _____ Home Telephone: _____

Email: _____

Home

Language: English Other Specify: _____

Gender: Male Female Date of Birth: (MM/DD/YYYY) _____

Marital Status: Single Married Divorced Re-married Widowed Engaged

If Married: Name of Spouse: _____ Occupation: _____

Student Medical Information

Medical Insurance/
Aid and contact
number: _____

Family Doctor: _____ Phone Nr: _____

Allergies / Serious Illnesses: _____

Do you suffer from any physical or mental conditions? If yes, please provide information

Do you take any prescription medication? If yes, please provide information

Any other information that will be helpful in case of a medical emergency:

PERSONAL INFORMATION

Student Personal Information (continued)

Please provide us with the contact details of 2 people that should be contacted during any emergencies:

First Name & Last Name:	Contact Number:	Relation to you:
1. _____	_____	_____
2. _____	_____	_____

Student Academic Information

Education

When did/will you graduate from High School: MM/DD/YYYY

Name of high school: _____

City / Town: _____

Please include a copy of either your June/ July or Final report card.

Higher Education

Final Year Classes/ Subjects & Percentage / symbols Achieved (if completed)

Name of College, University, or Institute	Period of Attendance	Degree/ Certificate Obtained

Employment History

Employer:	Position:	From:	To:
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Church Information

Have you made a full commitment to Christ? Y / N

Are you currently an active member of a church? Y / N

Name of Church: _____

Address: _____

Name of Pastor: _____

Cellphone: _____

Have you ever been accused / convicted of a criminal offence? Y / N

If yes, please provide details:

Please give 5 words that best describes you

1. _____
2. _____
3. _____
4. _____
5. _____

Essay Questions

Answer the following questions and send them with the application form. In order for your application to be processed it is vital that questions are answered thoroughly and legibly. Please type your answers in English. Please number answers appropriately.

1. Write your personal testimony.
2. What made you decide to apply for the Leap Discipleship Program San Clemente?
3. What do you expect from this program?
4. Do you have any specific area that would like to grow in during this program?
5. How do you plan to pay for the program?

PERSONAL INFORMATION

Parent / Guardian Information

To be completed if student is financially dependent on parents or if under 21 years of age.

First Name & Last Name: _____

Nationality: _____

Home Address: _____

Postal Address: _____

Occupation: _____ Relation to Student: _____

Cellphone: _____ Work Telephone: _____

Email: _____

Home

Language: English Other Specify: _____

Additional Information

Should the student be under 21, the rest of this form below must be completed as well.

First Name & Last Name: _____

Cellphone: _____ Relationship to student: _____

I _____ (Full name of parent/guardian/partner of the above stated Student)

am in full agreement with the above stated clauses and give full consent to his/her participation in Leap Discipleship Program. I have read and understood the terms and conditions, fees and liabilities as explained in Addendum A and agree to these terms and conditions.

Signature of Parent/Guardian/Partner _____ Signed at _____ on the ___ / ___ / ___

STUDY FEES

Program Fees and Accommodation	
Once off Program Fees	\$2 000
Or Monthly Installments	\$400 pm x 5 months

Food and Self-Catering

Each student must have **ATLEAST \$175** as a living allowance for groceries per month, totaling to **\$875** for the total of 5 months. Groceries can be expensive in California and this living allowance will be needed for the self-catering. This does not include eating out or any additional activities outside of Leap activities, so additional pocket money is recommended beyond the \$875 living allowance, but not required.

- I would like to pay the complete Program / Program and Accommodation Fee at the beginning of the year
- I would like to pay the Program / Program and Accommodation Fee in equally divided installments over a 5-month period

*Please note that these amounts are tentative and might change.

Initial Here _____

PROVISION OF STUDY FEES

Choose which of the following payment methods best describes how study fees will be provided.

- The applicant him/herself
- The applicant's parent or guardian

Full Name: _____

- Sponsors**
Please name the sponsors, the amount they plan to sponsor as well as how often they plan to sponsor the amount.

Name	Amount	Interval Once off / Monthly

Initial Here _____

Please send me information that will be helpful in raising sponsors:

Yes

No

Student Loan

From which institution? _____

Has it been approved?

Yes

No

Other Source (please specify)

More information regarding where the payment(s) needs to be made will be sent to the applicant once/if the applicant has been accepted into the program.

CHARACTER ASSESSMENT

First Name & Last Name: _____

Cellphone: _____

Address: _____

Please rate yourself according to the following characteristics:

Characteristic	Superior	Above Average	Average	Below Average	Unable to Rate
Spiritual Faith					
Participation in church activities					
Leadership					
Co-operation					
Moral Lifestyle					
Dependability					
Physical Health					
Emotional Stability					
Resourcefulness					
Honesty					
Getting along with Authority					
Getting along with Peers					
Compassion					
Purposefulness					
Self-Esteem					

Please send this form with your application to the Leap Office.

RECOMMENDATION FROM A SPIRITUAL LEADER

Directions to Applicant

Applicants for the Leap Discipleship Program must have this recommendation form completed. The applicant should fill in all the information in this top section and have his/her pastor, youth director, or other church leader fill in the remainder of the recommendation form. The church representative selected should not be related to the applicant but should be well acquainted with his/her spiritual commitment and character.

First Name & Last Name: _____

Cellphone: _____

Address: _____

Directions to Spiritual Leader

The applicant listed on this form has applied to Leap Discipleship Program and has listed you as a reference. Please answer each question as completely and honestly as possible to aid us in making an accurate assessment of the applicant and his/her character and capabilities. Feel free to type answers or to use another sheet of paper to answer questions on. Please number answers appropriately.

1. Describe your relationship with the applicant, including how long you have known him/her.

2. Describe the applicant's attitude towards church and church activities.

3. How has the applicant, to your knowledge, made public profession of his/her faith in the Lord Jesus Christ?

4. Are you aware of the applicant using alcohol, tobacco products, or illegal or habit-forming drugs? Please describe.

5. Are you aware of the applicant participating in behaviors inappropriate to a Christian lifestyle? Please explain.

6. Please rate the applicant according to the following characteristics:

Characteristic	Superior	Above Average	Average	Below Average	Unable to Rate
Spiritual Faith					
Participation in church activities					
Leadership					
Co-operation					
Moral Lifestyle					
Dependability					
Physical Health					
Emotional Stability					
Resourcefulness					
Honesty					
Getting along with Authority					
Getting along with Peers					
Compassion					
Purposefulness					
Self-Esteem					



7. Are there any factors in the applicant’s background that may have either a positive or negative influence on his/her success at a Christian institute?

8. List any other information that you think would be helpful in our accurate evaluation of this applicant.

9. Based on your experience with the applicant, how would you recommend him/her?

Highly recommended _____ Recommended _____ Would not recommend _____
Prefer not to make a recommendation _____

Signature

MM/DD/YYYY
Date

Please provide the following

Title	_____	Name	_____
Church	_____	Denomination	_____
Postal Address	_____	Telephone	_____

Please email to: sanclemente@jgc-leap.com

I (The Student) am fully capable to conduct this agreement without any assistance and/or have the full consent of my parents/guardian/partner to conclude this agreement. I have read and understood the terms and conditions, fees and liabilities as explained in Addendum A and agree to these terms and conditions.

I would like to receive the above services that I selected in this Application Form and have read and understood the Terms and Conditions, which is attached hereto, and forms part of the contract between myself/parent/ guardian and Leap, and to which the aforesaid selected services are subject to.

**Signature of
Applicant**

MM/DD/YYYY

APPLICATION CHECKLIST

Please ensure you have completed the below before sending in your forms.

- Written and attached the answer to your essay questions.
- Completed every section of the forms.
- Attached completed recommendation forms.
- Guardian or Parent has signed on behalf of students under the age of 18.
- Emails the completed application form to: sanclemente@jgc-leap.com