



Applicant's Photo

MBI/ELCG/ 2026/0A/

Certificate / Diploma

Study Year

First Name

Middle Name

Last Name

Date of Birth

Sub County

You're Full Home (Physical Location) Address (where you live)

Email

Phone

Your Secular Work (if any)

Work Phone (if any)

Spouse First

Spouse Middle Name

Spouse Last Name

Ministry (God calling) you are involved in

Full Ministry / Church Name where you worship

Full Ministry / Church (Physical location) Address where you worship

Your Senior Ministers Title/

Your Senior Minister's Email

Your Senior Minister's Phone

A brief history of your ministry/church, identifying past credentials held, past ministries involved with, past training Completed, etc

Please write the reason you would like to join MBI