



# ENROLLMENT AGREEMENT

I want to enroll in program:  BA/MA  MA  PhD  License Only

Name \_\_\_\_\_  
(First) (Middle) (Last) Suffix

Social Security # \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female  
mo. day yr.

Address \_\_\_\_\_  
Street or P.O. Box U.P.S. Shipping Address (no PO Boxes)  
\_\_\_\_\_  
City State Zip City State Zip

Telephone: Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

Cell ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

## Please complete the following:

I have been a Christian for \_\_\_\_\_years. I graduated from high school in \_\_\_\_\_(year).

Did you graduate from college?  Yes  No If yes, give year, degree earned and major from:

\_\_\_\_\_  
(name of college or university)

Do you hold a Masters Degree?  Yes  No Name of College? \_  
What was your Major? \_\_\_\_\_

Doctorate degree?  Yes  No Name of college? \_\_\_\_\_  
What was your Major? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No If yes, please explain in detail and attach.

Are you a licensed, commissioned or ordained minister?   
Yes  No  Year licensed/commissioned/ordained: \_\_\_\_\_

Denomination: \_\_\_\_\_ My current occupation is: \_\_\_\_\_

## Financial Consideration

1. There is a one-time, non-refundable application fee of \$75 that is due at the time of submission of your enrollment agreement.
2. Tuition is payable in modules per the appropriate schedule for your program as shown on the Academy's website. The NCCA may increase course costs at any time and you will be notified of any pending tuition increases.
3. Students may pay via check ("Above & Beyond Counseling Ministries"), via Paypal or by credit card on the Academy website.
4. Any student who orders a module and returns it within fifteen (15) days is eligible for a refund, less NCCA restocking costs and return shipment postage.

## Questionnaire for Enrollment

Please respond (on a separate sheet) to the following questions and return with your Enrollment Agreement

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

## Additional Requirements

All candidates must provide Above & Beyond Counseling Academy the following prior to completion of program:

1. A copy of the highest diploma, certificate or degree earned and related transcript. **Needs to accompany this application.**
2. A current resume including any background in counseling or areas of interest in counseling and a recent photo.
3. Proof of Ordination or Minister's License in the form of a photo-copy or official letter. (If applicable.)
4. Three reference forms (provided by N.C.C.A. with first course).
5. A letter of reference from your pastor or an elder in your church.

NOTE: The Candidate Evaluation Committee will not recommend anyone for certification or license whose student file is incomplete. The N.C.C.A. will conduct a background check on all candidates prior to awarding the license.

## Refund Policy

Above & Beyond Counseling Academy tries to be more than fair to the candidate who enrolls in a program and then, for some reason, needs to discontinue their candidacy. We certainly do not believe that an individual should be charged for a service, or for training, which they have not received. Therefore, we hope to exceed normal standards with regard to fairness toward our students as outlined herein.

The enrollment fee of \$75 will be refunded in full if the applicant is not admitted into the training program by the Evaluation Committee. However, once accepted as a candidate by the Evaluation Committee, the enrollment fee is non-refundable.

If a course is returned to A&B's headquarters in good (resalable) condition within fifteen (15) days of the date that it was shipped, the entire tuition for the course, less a \$25 restocking fee, will be refunded within thirty (30) days from receipt of the course.

## Please tell us how you were introduced to the Academy?

I first heard about Above & Beyond Counseling Academy from:

Internet    T.V. Ad    Radio    Christian Magazine    Pastor    Friend

Referred by (Name of Individual) \_\_\_\_\_

Other (Please Specify) \_\_\_\_\_

I understand that before I can receive my degree, certification or license, my entire tuition must be paid in full and that all required documents must be submitted.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Prospective Candidate

## Return Enrollment Agreement to:

Above & Beyond Counseling Academy  
Att: Donald J. Ibbitson, PhD  
PO Box 342593  
Tampa, FL 33694  
Ph: 800.264.6236