

INTERNATIONAL APPLICATION

| Office Use: Rec'd | |
|-------------------------|------------------|
| Name | |
| Gender: Male or Female | |
| Phone Contact | |
| Email | |
| CURRENT MAILING ADDRESS | |
| Street Name or Number | <i>OR</i> PO BOX |
| City | |
| Province or District | |
| Country | |
| Code | |
| Date of Birth/// | |
| Place of Birth | |
| Country of Citizenship | |

Is English your second language?

Yes _____ No _____

Marital Status-

Single _____ Engaged _____

Married-_____ Name of Spouse-_____

EDUCATIONAL EXPERIENCE

Date of graduation from high/secondary school _____

Have you earned a degree from any college or university?

Yes _____ No _____

If yes, complete the following:

College/University Name- _____

Degree Major-_____

Degree Minor- _____

Date Degree Earned- _____

ACADEMIC PROGRAM: Please indicate which academic program you are asking to enroll

<u>____Certificate of Biblical Studies (1 year)</u>

____Associate of Biblical Studies (2 year)

____Bachelor of Practical Ministry (4 year)

<u>*</u>Bachelor of Biblical Studies (2 year transfer degree)

<u>*</u>Bachelor of Applied Ministry (3 year)

* Bachelor of Biblical Studies and Bachelor of Applied Ministry require special approval for acceptance. Contact Seattle Bible College for further information.

Do you own or have access to a computer

Yes _____ No _____

PERSONAL INFORMATION

| Name of church currently attending | |
|------------------------------------|---------|
| Address of church | Phone # |
| Senior Pastor | |

- Current ministry involvement:
- Give a brief description of your Christian walk (salvation, baptism, current walk):
- Briefly describe your home life, including interpersonal relationships and thinking regarding authority figures:
- Because of SBC's commitment to the Scripture as authoritative for life and godliness, scriptural guidelines form the basis of behavior to be encouraged or restricted. During your time with Seattle Bible College, it is our desire that you restrict any use of recreational drugs, tobacco, and alcohol and follow the scriptural guidelines for sexual purity. Do you agree with this? Yes No

| Signed | Date |
|--------|------|
| | |

Pastor Reference: Name and title of pastor/ministry leader who is recommending you to study courses at Seattle Bible College.

| Name | Title |
|------|-------|
| | |

Email for pastoral reference _____