



"Your word is a lamp to my feet and a light to my path."
Psalm 119:105

APPLICATION FOR ADMISSION

() Full-Time (9 units) or () Part-Time (6 units or less)
() Credit or () Audit() Fall 20_____ -or () Spring 20_____

Personal Information

() Mr. () Mrs. () Miss

Full Legal Name: _____

Address _____
Last First Middle

City _____ State _____ Zip Code _____

Home Phone () _____ Work Phone () _____

Social Security Number _____

Birth date _____ Birthplace _____
Month Day Year

Country of Citizenship _____ If not USA, Type of Visa _____

Marital Status (check one) () Single () Engaged () Married () Remarried() Separated () Divorced () Widowed

If married, spouse's name _____ Number of children living at home _____

If you are engaged, name of fiancé _____

Planned date of marriage _____

If single or under the age of 21: Father's and Mother's Names _____

General Health: () Excellent () Fair () Poor

For Emergencies Contact: Name: _____ Phone Number: _____

Doctor's Name, Address and Phone Number:

If you have any physical disability, indicate the nature of the disability and any special assistance or medications you require.

Have you ever had to discontinue study or work because of physical, emotional and/or mental problems?

() Yes () No If yes, please explain:

Have you ever been convicted of a felony or misdemeanor?
() Yes () No If yes, please explain on a separate sheet of paper.

Educational Information

High School _____
Name of School City State Country

College or University _____
Name of College/University City State Country

Dates Attended: From _____ To _____

Major Field of Study _____

Earned degree _____

Have you ever been expelled or suspended () Yes () No If yes, please explain:

Spiritual Information

What church do you attend? _____
Name

Address _____
Street City State Zip

Pastor's Name _____ Denominational Affiliation _____

Are you are member? _____ Date of conversion _____

On a separate sheet give a brief testimony of your born-again experience.

When did you receive the Baptism with the Holy Spirit according to Acts 2:4? _____

If you have not received the Baptism with the Holy Spirit, what is your attitude concerning it?

Why do you want to attend our Bible Institute.?

What spiritual giftings do you believe the Holy Spirit has given you to minister?

What are your short- and long-term ministry goals? Please explain on separate sheet.

Are you currently ministering in your local church and in what area?

For student to enroll in B.I. at NLCC,

Pastor Signature required _____

Work Information

Name of Employer _____

Type of Work _____

Address _____
Street City Zip Code

Student Signature

Application Date