

Alpha Bible College and Seminary

APPLICATION

TYPE AND PRINT ALL ITEMS

Name Last First Middle Maiden

Present Address

City State Zip

Phone () E-mail

PERSONAL

Gender: Male Female

Marital Status: Single Married Separated Divorced Widowed

Birth Date Age

Social Security Number - -

City/State Birthplace:

Are you a citizen of the U.S.? Yes No

If no, country of citizenship

SPIRITUAL

When did you accept Christ as your personal Savior? / Month Year

Have you had an Acts 2:4 experience? Yes No

Do you attend church regularly? Yes No Are you a member? Yes No

Are you a regular tither (10%) to your local church? Yes No

List any type of Christian service you have done:

Home church/denomination: _____

Pastor's Name: _____

Phone: (_____) _____ Church Website _____

Address of Church: _____

City _____ State _____ Zip _____

FAMILY

Spouse:

If married, name of spouse: _____

Age: _____ Birth Date _____/_____ Occupation: _____

Children:

Name: _____ Birth Date _____ Male Female

Name: _____ Birth Date _____ Male Female

Name: _____ Birth Date _____ Male Female

Name: _____ Birth Date _____ Male Female

Parents:

Name of your father or guardian (Living Yes No) _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Occupation: _____

Denominational Preference: _____

Name of your mother or guardian (Living Yes No) _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Occupation: _____

Denominational Preference: _____

EDUCATION

High School:

Name of School _____

Dates attended _____ Did you graduate? Yes No

College:

Name of School _____

Dates attended _____ Course of study/degree _____

Other:

Name of School _____

Dates attended _____ Course of study/degree _____

EMPLOYMENT EXPERIENCE

Present Employer: _____

Address of Employer: _____

Dates (from/to): _____

Duties: _____

Past Employer: _____

Address of Employer: _____

Dates (from/to): _____

Duties: _____

HISTORY

Have you used or are you currently using illegal drugs? _____

If yes, date of last use? _____

Have you ever been involved in homosexuality/lesbianism? _____

If yes, how long since involved? _____

Do you currently smoke? _____ Do you currently drink alcohol? _____

Have you been arrested? _____ If yes, when and attach a brief explanation.

Were you convicted? _____ If yes, when and attach a brief explanation.

HEALTH

Please describe physical or emotional conditions, and state any special attention or treatment required.

FINANCES

How do you plan to pay for your education? _____

OTHER

How did you hear about ABCS? _____

I was referred by: _____

AGREEMENT

I hereby certify that all information submitted in the application to be the accurate.

Signature of Applicant

Date

PHOTO

Include a recent head and shoulder picture with your completed application.

CLASS REGISTRATION

Please mark which classes you will register.

First Quarter:

_____	Re.101	World Religions
_____	Bi.101	Biblical Ethics
_____	Bi.102	Church History
_____	Bi.103	Biblical Faith

Second Quarter

_____	Th.101	Evangelism
_____	Ps.101	World Missions
_____	Ps.102	Evidence and Truth
_____	Bi.104	Old Testament Survey I
_____	Ps.103	First Year Internship

Third Quarter

_____	Bi.205	Old Testament Survey II
_____	Bi.206	Bible Basis
_____	Bi.207	New Testament Survey
_____	Ps.202	Music and Worship

Fourth Quarter

_____	Ps.202	Effectively Leading Others
_____	Re.203	Understanding People
_____	Re.204	Teaching Techniques
_____	Ps.203	Spiritual Maturity
_____	Ps.205	Second Year Internship

Please return this form to:

Alpha Bible College/Church of the Harvest/PO Box 758/Mt Sterling, KY 40353

Do Not Forget to Include Your \$50.00 Non Refundable Application Fee

Alpha Bible College and Seminary reserves the right to require the withdrawal of any student who is considered to be out of harmony with the philosophy of the institute.