

FAITH COVENANT MINISTRIES BIBLE INSTITUTE

1 Byron Road North Brunswick, NJ 08092

Phone: (732)754-7393 Fax: (856) 314-8488

APPLICATION FOR ADMISSION

(Please print or type the answers to all questions)

Desired School Location Of Applicant : _____

Dates of School term (or classes): _____

Please Provide All The Following Information:

Last Name _____ **First Name** _____ **MI** _____

Date of Birth _____ **Age** _____ **Male** _____ **Female** _____

Marital Status (check one): Single _____ Married _____ Widowed _____ Separated _____ Divorced _____

Do you have any children? Yes _____ **No** _____ **How Many?** _____

Mailing Address _____
(Street or PO Box) (Town) (State) (Zip Code)

Country _____ **Telephone number(s)** _____

Email Address: _____

When were you saved (born-again)? _____ **Baptized in the Holy Spirit?** _____

School grade level that you have completed _____

Have you previously attended a Bible School? _____ **If so, give details** _____

What languages to you understand and speak? _____

To what area of ministry do you believe you are called? _____

If you are currently in ministry, list the dates & types of service. Use the back of this sheet if necessary.

Please Describe how you are now serving in ministry (Use the back of this sheet if necessary). _____

The name of your local church you attend regularly: _____

How long have you attended your current local church? _____

The name of your denomination, network or Apostolic group _____

The name, address and phone number of your pastor or overseer _____

Who recommended that you apply for this training? _____

Why do you desire to receive the Bible training offered by FCMBI? _____

How will you be financing your education? _____

How does your family feel about your attendance at FCMBI? _____

How will you transport yourself to classes? _____

Do you have a full time job? _____ A part-time job? _____ Occupation? _____

What is your normal work schedule? _____

For your application to be considered for acceptance, you must send the following items along with this completed Application Form:

- 1. A digital photo of yourself emailed to fcbiregistrar@msn.com.
- 2. Two completed Character Reference Forms. One from your pastor or church leader and one from a friend or co-worker (not a family member or relative).
- 3. A sealed transcript of your high school grades (or college grades if you are desiring us to accept previous credits).
- 4. The \$10.00 Application Fee.

Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE: (Office Use Only) Date Received: _____

ACCEPTED FOR ADMISSION _____ ADMISSION DENIED _____

Interviewed by _____ Date Notified _____

Comments _____

Application complete: Yes _____ No _____ Student ID#: _____ Log In Name: _____

Requires: Picture _____ Application Fee _____ Character Reference Form(s) _____ Transcript _____