

Personal Information

General

Clip photo on top.
(approximately
1½"x1½")
Write name on back of
Photo.

Name _____

Last, First, Middle (if you use middle name instead of first name, please circle)

Male Female

Home Phone: (____) _____ Cell Phone: (____) _____

Home Address _____
(Number and Street) (City) (State) (Zip Code)

Present Address _____
(Number and Street) (City) (State) (Zip Code)

Date of Birth __/__/__ Birthplace (City) _____ (State) _____

Social Security No. _____ - _____ - _____

Citizen of: USA Other Country: _____ Race: _____

If other, give type of resident: Student Visa Permanent Visa Other type of Visa _____

I plan to enter:

Fall Semester, 20 _____

Spring Semester, 20 _____

I will be a:

Full-time student

Part-time student

I will be living:

On-campus

Off-campus

Email Address: _____ Drivers License No. _____ State: _____

Marital Status & Children

Single:

Never Married

Engaged; Date of wedding ____/____/____

Divorced*; How long? _____

Widowed

Married:

Spouse's Name: _____

Separated*

You or your spouse were previously married*

(*Include letter of explanation with application)

Name and age of Children:

1) _____ () 2) _____ () 3) _____ () 4) _____ ()

Church Affiliation

Church Name _____ City _____ Organization _____

Member How Long? _____ Pastor's Name: _____ Phone (____) ____ - _____

Pastor's Complete Address: _____

Have you been baptized in the name of Jesus Christ? Yes No

(If so, when and where? (_____))

Have you received the baptism of the Holy Ghost with the evidence of speaking with tongues?

Yes No (If so, when and where? (_____))

References

List three character references:

Friend:

Name Number and Street City State Zip Code (____) ____ - Phone

Employer or Business Person:

Name Number and Street City State Zip Code (____) ____ - Phone

Teacher, Youth Pastor, Church Elder:

Name Number and Street City State Zip Code (____) ____ - Phone

Health Information

Your Family Physician

Name _____ Number and Street _____ City/State _____ Zip Code (____) _____ - _____ Phone _____

Do you have any health/physical conditions that require special attention?

No Yes If so, explain: _____

Are you taking any prescribed medication?

No Yes If so, what kinds? _____

Have you ever used illegal drugs?

No Yes If so, explain length or use, type of drug, and date of last use: _____

Are you receiving or have you received professional treatment for any mental, emotional, or physical illness?

No Yes If so, explain: _____

Are you receiving or have you received professional counseling of any nature?

No Yes If so, explain: _____

Have you been diagnosed with Attention Deficit Disorder, Conduct Disorder, or Oppositional Defiant Disorder?

No Yes If so, explain and list types of medication: _____

Financial Information

How do you plan to finance your first year of college?

Savings _____% Loan _____% Part time work _____% Other _____%

Will your parents offer any financial support?

No Yes _____%

Are you eligible for any of the following?

VA benefits Social Security benefits

Vocational Rehab Texas Rehab

Research Information

Have you ever visited the campus? No Yes, if so when? _____

Do you know anyone who is, or has been, associated with TBC (student, faculty/staff member, administrator, other)?

No Yes, if so who? _____

How did you hear about TBC? _____

How do you feel TBC will benefit you? _____

Additional Information

In which of the following capacities have you been active?

- | | | | | |
|---|---|---|--|--|
| <input type="checkbox"/> Youth leadership | <input type="checkbox"/> Outreach | <input type="checkbox"/> Church office | <input type="checkbox"/> Teaching | <input type="checkbox"/> Singing in church |
| <input type="checkbox"/> Preaching | <input type="checkbox"/> Worship leader | <input type="checkbox"/> Choir director | <input type="checkbox"/> Playing keyboards for church service | |

Please list any other information the College should be aware of in considering your application for admission:

Pledge

The following agreement must be read, signed, and dated:

If accepted as a student at TBC, I agree to cheerfully abide by all regulations, requirements, and policies of the College which are in force during my tenure on or off campus. I agree to conduct myself in a Christian manner both on and off campus. I also understand that a non-refundable \$50.00. Application fee must be enclosed with the application.

Signed: _____ Date: _____

Personal Testimony

Please use space provided below to handwrite your personal testimony:

Who would you consider to be the main influence in you desiring to attend TBC (parents, friend, pastor, an alumnus, etc.)?

Office Use Only

Off. _____ Aca. Off. _____ Review Comm. _____
Date: ___/___/___ _____ Date: ___/___/___

Request for Transcript

To: Registrar of _____
(Name of college or high school)

I am applying for admission to Texas Bible College.
Please send an official transcript of my grades to: **Director of Academics**
Texas Bible College
3900 College Drive
Lufkin, Texas 75901

If there is a charge for this service, please bill me at:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Health Certificate

TO BE COMPLETED BY PHYSICIAN:

This is to certify that _____ has been examined and is found to be free from any transmissible, contagious, or infectious disease.

The following tests have been administered:

General Examination: _____

T.B. Skin Test: _____

(Signature of Physician)

(Date)

Admission Forms



Texas Bible College
3900 College Drive
Lufkin, Texas 75901

Office (936) 633-7799
Fax (936) 699-2600

Steps for Admission:

Step 1:

Complete the Application for Admission.

Step 2:

Mail the Transcript Request Form to the last high school you attended. If you have previously attended any other college(s)*, make the number of copies of the Transcript Request Form needed and mail to the college(s). Transcripts from these educational institutions will be mailed directly to Texas Bible College.

Sep 3:

Have a physician conduct the required examination and complete the Health Certificate.

Step 4:

Mail the Application for Admission and a \$50.00 Application Fee to Texas Bible College. If possible, mail your Health Certificate and a personal photo with your Application for Admission. These additional items must be on file no later that Registration Day.

**Transfer students from other UPCI Bible Colleges must also request a release form from the college where they formerly attended. In order to obtain this release, all financial responsibilities at the former college must be cleared.*