



Baptist Bible Institute of Bucyrus

1600 Marion Rd. ~ Bucyrus, OH 44820

(419) 562-7952

ENROLLMENT APPLICATION

PERSONAL INFORMATION:

Name: _____

Address: _____

City: _____

State/Zip: _____

Telephone: _____

email: _____

MARITAL STATUS:

Single Widowed

Married Separated

Divorced

If you have been married and, at present, are not living with your spouse, please state reason:

EDUCATION:

High School attended: _____

City/State location of high school: _____

Did you Graduate? What year? _____

Highest grade completed: _____

College(s) attended and city/state location:

Other school(s) attended: _____

CHRISTIAN TESTIMONY:

Please briefly describe how you were saved and when and where you were baptized on a separate paper or the reverse side of this application. Please include all dates, when known.

Name, address, phone and web address of the church in which you are currently a member:

Name, address and phone number of your pastor:

Have you done any Christian work? _____

If yes, what? _____

Do you plan to enter full-time Christian work? _____

If yes, what? _____

- I understand that I am to contact my pastor, asking him to complete the enclosed character reference form. I further understand that he must personally mail the form to the BBIB.
- I have read the BBIB *Student Guide*, and I am in agreement with the doctrinal statement and rules.
- I have enclosed the \$25 application fee.
- I understand that the application fee is non-refundable.
- I certify that the enclosed information is true and accurate to the best of my knowledge.

Signature

Date