

South Florida Bible College & Theological Seminary
www.sfbc.edu

Application for Admission

Expected Entry and Status

Fall 20__ Winter 20__ Spring 20__ Summer 20__
 Part-time Full-time Distance Learning

Personal Information *(please print)*

Sex: M F

Name: Last _____ First _____ Middle _____

Present Mailing Address: Street _____

City _____ State _____ Zip _____ Country _____

Permanent Mailing Address: Street _____

City _____ State _____ Zip _____ Country _____

Phone: Home () _____ Work () _____ Email _____

Country of Citizenship: _____ Place of Birth: _____ Date of Birth __/__/__

Social Security Number: _____ Native Language: _____

Ethnic Background: *(optional)*

American Indian Asian Black non-Hispanic Hispanic
 White non-Hispanic Other _____

If you are an international student, please indicate your current Visa Status:

Student Exchange Student Permanent Resident

Card Number _____

Expiration Date of: Visa __/__/__ Passport __/__/__

Marital Status: *(mark all that apply)*

Single Married Engaged Widowed Separated
 Divorced Remarried

Spouse's Name _____ Date of Marriage __/__/__

Name(s) of Child(ren) and date(s) of birth _____

Is your spouse in agreement with your plans to enter college/seminary?

Your Present Denominational Affiliation

Name of Church _____ Denomination _____
Street _____ Length of Membership _____
City _____ State _____ Zip _____ Country _____
Church Telephone () _____ Pastor's Name _____

Language Proficiency

Indicate any language(s) other than English in which you are proficient _____

Check if you have you studied either of these languages: { } Greek { } Hebrew

Course of Study

{ } Associate of Arts in Biblical Studies

{ } Bachelor of Arts Degree:

{ } Biblical Studies { } Christian Psychology
{ } Business Management { } Religious Education
{ } Christian Counseling { } Pastoral Ministry

{ } Master of Arts Degrees:

{ } Biblical Studies { } Pastoral Ministry & Counseling
{ } Christian Counseling { } Master of Religious Education
{ } Christian Psychology { } Master of Sacred Theology
{ } Master of Divinity

{ } Doctoral Degrees:

{ } Doctor of Philosophy in Christian Counseling
{ } Doctor of Philosophy in Christian Marriage and Family Counseling
{ } Doctor of Philosophy in Christian Psychology
{ } Doctor of Philosophy in Christian Thought
{ } Doctor of Ministry
{ } Doctor of Philosophy in Pastoral Counseling
{ } Doctor of Religious Education
{ } Doctor of Theology

Attach a statement describing your experience on the mission field, including length of service, place, agency, and type of work.

Employment Experience

If currently employed, indicate position _____

Please indicate any significant business, occupational, or military experience:

Organization _____ Nature of Work _____ Dates (month/year) _____

General

What are the significant factors that influenced your choice of South Florida Bible College & Theological Seminary?

- | | | | |
|--------------------------|--------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | Present SFBC&TS Student/Friend | <input type="checkbox"/> | Relative attending |
| <input type="checkbox"/> | SFBC&TS Faculty Member | <input type="checkbox"/> | Pastoral Referral |
| <input type="checkbox"/> | SFBC&TS Representative | <input type="checkbox"/> | Alumnus |
| <input type="checkbox"/> | I am a SFBC&TS graduate | <input type="checkbox"/> | Institutional Reputation |
| <input type="checkbox"/> | Magazine ad in _____ | <input type="checkbox"/> | Other _____ |
| <input type="checkbox"/> | SFBC&TS' Web Site | | |

Doctrinal Statement (Please sign one of the following.)

I have read the doctrinal statement in the Seminary Catalog and my convictions are in agreement with the doctrines stated in it.

Signature: _____ Date: __/__/__

Personal Testimony

Name: Last: _____ First: _____ Mi: _____

Please type or write your personal testimony, including special factors and/or individuals involved in your spiritual growth. (Attach separate sheet, if so preferred.)

I have enclosed the application and registration fee and hereby apply for enrollment for the purpose of personal enrichment or earning a degree at this institution. Transfer of credits from this institution to other institutions is at the discretion of the receiving institution.

Authorized Signature _____ Date _____

Payment by: check payable to SFBC&TS Visa Mastercard

Expiration date: _____ Cardholder's Name _____

Card number _____

Admissions Checklist

The following items are required in the application process:

- { } Application. Complete the application form and return it to the Admissions Office.
- { } Complete the Personal Testimony form and return it with your application.
- { } A written statement concerning the student's desire to pursue a degree at SFBC&TS.
- { } Application Fee/Registration Fee. \$110.00. Non-refundable.
- { } Transcripts. Submit all official transcripts of college and/or graduate work. Use the enclosed form and duplicate if necessary.

Note: When all forms have been received and evaluated, you will be advised of the Admissions Committee's decision. The Admissions Committee may request that you submit additional materials and/or that you interview with a representative of the College/Seminary.

If you have any questions, feel free to contact us at:

South Florida Bible College and Theological Seminary
747 South Federal Highway
Deerfield Beach, Florida 33441

1-800-432-1926 or (954) 426-8652
Fax (954) 480-9755
email: biblecollege@sfbc.edu
<http://www.sfbc.edu>

South Florida Bible College and Theological Seminary does not discriminate against qualified individuals with disabilities in the recruitment and admission of students, the recruitment and employment of faculty and staff, and the operation of any of its programs and activities, as specified by applicable federal laws and regulations.