

OFFICIAL INTERNATIONAL APPLICATION

**Free Gospel Bible Institute, Inc.**

P. O. Box 477

Export, Pennsylvania 15632

**REQUIRED!**  
**Attach**  
  
**Recent**  
  
**Photograph.**

**For Office Use Only**

Date Received \_\_\_\_\_ App. Fee Paid \_\_\_\_\_  
Date References Sent \_\_\_\_\_  
Accepted \_\_\_\_\_ Rejected \_\_\_\_\_  
By \_\_\_\_\_ Date: \_\_\_\_\_  
Notified \_\_\_\_\_

Please Type  
Or use Black  
Ink.

Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
RD #. PO Box and/or Street Number & Name, Apt.#

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Age \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Birth Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

City of Birth \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Country of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Father's Name \_\_\_\_\_ Christian: \_\_\_ Yes \_\_\_ No

Mother's Name \_\_\_\_\_ Christian: \_\_\_ Yes \_\_\_ No

**Your Marital Status:** \_\_\_ Single \_\_\_ Widow/Widower \_\_\_ Separated \_\_\_  
\_\_\_ Engaged \_\_\_ How long? \_\_\_ Fiancée is Christian? \_\_\_ Yes \_\_\_ No Intended wedding date: \_\_\_\_\_

Married? \_\_\_ How long? \_\_\_ Number of children \_\_\_ If accepted as a student what provision have you made for their support? \_\_\_\_\_

Have you ever been divorced? \_\_\_ Yes \_\_\_ No Has your spouse ever been divorced? \_\_\_ Yes \_\_\_ No  
Explain: \_\_\_\_\_

**Church Affiliation:**

Of what church are you a member? \_\_\_\_\_

Are you in agreement with the Doctrinal Basis of Free Gospel Bible Institute? \_\_\_ Yes \_\_\_ No

When were you converted? \_\_\_\_\_ Have you backslidden since? \_\_\_ Yes \_\_\_ No

If so, when were you reclaimed? \_\_\_\_\_ Are you called of God for Christian service? \_\_\_ Yes \_\_\_ No

Do you feel that God is leading you to attend Free Gospel Bible Institute? \_\_\_ Yes \_\_\_ No

Have you received the baptism of the Holy Ghost according to Acts 2-4? \_\_\_ Yes \_\_\_ No

If not, are you earnestly seeking this? \_\_\_ Yes \_\_\_ No

What leads you to believe that you have a call?

**Musical Abilities:** Do you sing? \_\_\_ Yes \_\_\_ No What Voice? \_\_\_\_\_ Do you play any instruments?  
\_\_\_ No \_\_\_ Yes Which ones?

Do you have any special skills, such as computer, secretarial, carpentry, mechanics, electrical, building, etc.?  
\_\_\_\_\_

**Ministry Experience:**

List any ministries in which you have been involved and the duration: \_\_\_\_\_

**Previous Education**

Are you a high school graduate?  Yes  No Date: \_\_\_\_\_ If not, last grade completed: \_\_\_\_\_

Other schools/institutes/colleges you have attended since then (submit copy of transcripts): \_\_\_\_\_

Name	Address	Years	Diploma/Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Military Service:**

Have you been in any military service?  Yes  No If yes, what branch? \_\_\_\_\_

How long? \_\_\_\_\_ Date honorably discharged: \_\_\_\_\_

**Health:** What is the general condition of your health? \_\_\_\_\_

Do you have any problems which might interfere with your studies or duties here as a student?  Yes  No

Explain: \_\_\_\_\_

**Employment:**

Are you employed at present?  Yes  No If Yes Where? \_\_\_\_\_

Have you any means of contributing, regularly towards the expense of Free Gospel Bible Institute?  Yes  No

**Commitment:**

Will you commit yourself to complete the 3 year course required for graduation?  Yes  No

Will you cheerfully abide by any circumstances that may arise?  Yes  No

Will you obey all rules and regulations and those in authority of Free Gospel Bible Institute?  Yes  No

Are you in harmony with the principles that Free Gospel Bible Institute maintains?  Yes  No

How did you hear about Free Gospel Bible Institute? \_\_\_\_\_

**GIVE TWO CHARACTER REFERENCES WHO ARE NOT RELATIVES OR PEERS**

Name: _____	Name: _____
Address _____	Address _____
City: _____	City: _____
State _____ Zip _____	State _____ Zip _____
Phone: _____	Phone: _____

**PASTOR:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_

**\*\* IMPORTANT \*\***  
**A \$125.00 non-refundable fee is required**  
**TO BE SUBMITTED WITH this application.**

I am applying for:  Fall Term (August)  Spring Term (January) of \_\_\_\_\_ (School Year)  
as a member of the  Freshman  Junior  Senior class.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_