

**OFFICIAL AMERICAN APPLICATION FORM**

**Free Gospel Bible Institute, Inc.**

6525 Italy Road - P. O. Box 477  
Export, Pennsylvania 15632

Please submit a \$35.00 non-refundable application fee with this application.

**Required!**  
Please attach a recent photograph

Please use black ink.

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ App. Fee Paid: \_\_\_\_\_

Date References Sent: \_\_\_\_\_

Certificate Of Health Rec'd: \_\_\_\_\_

Reference letters:    1    2    3    Testimony Rec'd: \_\_\_\_\_

Accepted: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

Date Notified: \_\_\_\_\_

Name \_\_\_\_\_

First Middle Last

Address \_\_\_\_\_

RD #, PO Box and/or Street Number & Name

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

Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Birth Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Month Day Year

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

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

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

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

Marital Status:

\_\_\_\_\_ Single \_\_\_\_\_ Engaged \_\_\_\_\_ How long? Is fiancée a Christian? \_\_\_\_\_ Yes \_\_\_\_\_ No 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? \_\_\_\_\_ Yes \_\_\_\_\_ No Which ones? \_\_\_\_\_

Do you have any special skills, such as typing, carpentry, mechanics, 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 Where? \_\_\_\_\_

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

Do you expect to complete the work 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 which Free Gospel Bible Institute maintains? \_\_\_\_ Yes \_\_\_\_ No

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

**GIVE TWO CHARACTER REFERENCES, other than pastor, relative or peer:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip \_\_\_\_\_

State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

**PASTOR:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

<p><b>IMPORTANT</b></p> <p><b>A \$35.00 non-refundable fee is required to be submitted with this application.</b></p>
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This application is for the term: \_\_\_\_ Fall \_\_\_\_ Spring \_\_\_\_\_ (school year) as a member of the \_\_\_\_ Freshman \_\_\_\_ Junior \_\_\_\_ Senior class.

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