

# CHARIS BIBLE COLLEGE OF JACKSONVILLE

## APPLICATION FOR ADMISSION

**Please complete and mail to:**

Registrar  
Charis Bible College of Jacksonville  
P.O. Box 532, Ponte Vedra Beach, FL 32004  
Telephone: (904) 588-6456

**FOR OFFICIAL USE ONLY**

Date Rec'd \_\_\_\_\_

Fee Rec'd \_\_\_\_\_

Student ID # \_\_\_\_\_

**Place  
Photo  
Here  
2" x 2"**

**Application for Bible College:**

Start in:  September  November Starting Year: \_\_\_\_\_  
Starting as:  First-year student  
 Part-Time Night School

**Payment:**

Please enclose a check/money order for the \$100 registration fee, or if you would like to charge the fee to your Visa or MasterCard, please provide the following billing information. (*Couples may share the registration fee, i.e. \$100 total, not \$100 each.*)

Name as it appears on card: \_\_\_\_\_

Visa  MasterCard

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Check/Money Order Enclosed

**General:**

Your Name:  Mr.  Ms.  Mrs. \_\_\_\_\_  
Last Name First Name MI

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

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell/Work Phone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Personal:**

Gender:  Male  Female Marital Status:  Single  Married  Separated  Divorced  Widow/Widower

Have you previously attended CBC or extension school?  Yes  No If yes, when and where? \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_\_

Are you a US citizen?  Yes  No If no, country of citizenship? \_\_\_\_\_

If no, what type of visa have you obtained to live in the United States? \_\_\_\_\_

**Spiritual:**

When did you accept Christ as your personal Savior? \_\_\_\_\_

Have you been baptized in the Holy Ghost?  Yes  No Do you speak in tongues?  Yes  No

Do you attend church regularly?  Yes  No Are you a member of a church?  Yes  No

Current church / denomination name: \_\_\_\_\_

Pastor's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Church address: \_\_\_\_\_

**Medical:**

Are you presently under the care of a physician?  Yes  No

If yes, please explain: \_\_\_\_\_

**Family:**

**Spouse:**

If married, name of spouse: \_\_\_\_\_

**Children:**

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

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

**Parents: (please complete this section if under 18 years of age)**

Name of father/guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of mother/guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Education History:**

High School: \_\_\_\_\_ Dates attended: \_\_\_\_\_ Did you graduate?  Yes  No

College: \_\_\_\_\_ Dates attended: \_\_\_\_\_ Course of study/degree conferred: \_\_\_\_\_

Bible College: \_\_\_\_\_ Dates attended: \_\_\_\_\_ Course of study/degree conferred: \_\_\_\_\_

Other: \_\_\_\_\_ Dates attended: \_\_\_\_\_ Course of study/degree conferred: \_\_\_\_\_

**Employment Experience:**

Present employer: \_\_\_\_\_ Past employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_ Address of employer: \_\_\_\_\_

Dates (from/to): \_\_\_\_\_ Dates (from/to): \_\_\_\_\_

Supervisor: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**Ministry Experience and Interests:**

Ministry experience:  Full-time  Volunteer  Part-time Number of Years: \_\_\_\_\_

Have you been involved in Praise and Worship ministry?  Yes  No In what way? \_\_\_\_\_

Describe ministry experience: \_\_\_\_\_

Mark 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> for areas of interest:

- |   |                                     |  |
|---|-------------------------------------|--|
| <input type="checkbox"/> Counseling       | <input type="checkbox"/> Theology   | <input type="checkbox"/> Music Ministry              |
| <input type="checkbox"/> Biblical Studies | <input type="checkbox"/> Missions   | <input type="checkbox"/> Practical Ministry/Helps    |
| <input type="checkbox"/> Church Growth    | <input type="checkbox"/> Evangelism | <input type="checkbox"/> Pastoral Ministry/Preaching |

**Affirmations:**

I have carefully read the "Dress Code and Conduct Information," and I agree to adhere to these guidelines completely for as long as I am an active student at Charis Bible College.

I have carefully read the "Doctrinal Statement," and I affirm my belief in each of the articles.

I have carefully read the "Financial Worksheet" and the "Enrollment and Admissions Information," and I agree to abide by the financial policies set forth by CBC.

I understand that faithfulness is most important for success as a student at CBC. I will be faithful to keep my appointments, fulfill my obligations, complete the tasks I have been assigned, and to do them on time.

*I certify, to the best of my knowledge, that all of the answers and statements on this application are true, and give an accurate and adequate account of my background and beliefs.*

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