

APPLICATION INFORMATION

HBC Altered

Please attach a headshot-style photograph, taken against a solid and light-coloured background.

APPLICATION FORM

PERSONAL DETAILS:

Last/Surname:		First Name: _		
Address:				
	Post code:			
Phone number:	Email:			
Gender: male female	Date	of Birth:		
Age: Nationality:				
Marital status: Please indicate				
Widowed				
EDUCATION MATTERS:				
Highest level of school completed:				
Did you receive a diploma, degree, o	or professiona	ll? If yes, pleas	se tell which one.	
Have you ever attended another Bib	le College? If	yes, please in	dicate when and	
where and tell how long you attended.				
Do you have any learning disabilitie	s that will aff	ect your perfo	rmance in Bible	
College? Yes No				
In what language was the majority of	of your primar	y and seconda	ry education?	
(English or other—please specify)				
Please include with your application	a copy of yo	ur educational	qualifications	

HEALTH MATTERS:
Please explain your present health condition.
Do you suffer from any medical condition? Please specify.
Do you suffer from any type of mental illness? Please explain.
PERSONAL HISTORY:
Do you have any criminal records? Yes No
If yes, please explain
SPIRITUAL INFORMATION: Do you faithfully attend church? Yes No If no, please explain why.
Do you believe in the New Testament Salvation?
Have you been baptized in Jesus Name according to Acts 2:38?
Have you ever received the gift of the Holy Ghost? Yes No
If yes, how long have you had the Holy Ghost?
On a separate sheet of paper please explain the plan of salvation as you understand
it.
Please summarise your activities you are involved in, either present or past whether church or community.

How do you feel that Harvest Bible College will benefit your ministry/life?		
FINANCIAL REQUIRMENTS:		
Do you understand your financial recand do you have the means in which	quirements for attending Harvest Bible College to meet them? Yes No	
	es of which one should be your Pastor/minister. own you for at least 5 years and not a family	
Name:		
Address:		
Phone number:	(work or home)	
Email		
Name:		
Address:		
Phone number:	(work or home)	
Email		
Name:		
Address:		
Phone number:	(work or home)	
Email	·	

DECLARATION: I agree to abide by the gupledge to fulfil my obligations academically, that any false statements may jeopardise my application being rejected.	spiritually and financially. I understand
Applicants Signature:	Date:
SIGNATURE OF PASTOR IS REQUIRED PROCESSED.	D FOR THE APPLICATION TO BE
I as the Pastor/Minister of	do give my consent
for my saint to attend Harvest Bible College a blessing.	and they have my full support and
	Date:
Pastor's Signature	

A £50.00 non-refundable application fee must accompany this application.