GLOBAL UNIVERSITY

BEREAN SCHOOL OF THE BIBLE

APPLICATION
(Non-Degree Studies)

ABA Aboriginal Bible Academy

Instructions: Please print or type ALL information on this form. You may refrain from answering any questions which you feel would betray your confidentiality, but the more we know about you the better we can serve you.

Status: ☐ **New Applicant**   ☐ **Former**   Student Number (if former student): _____

Last/Family Name: _____   Home Address: _____

First/Given Name: _____   _____

Middle Name: _____   _____

Maiden Name: _____   Country: _____

Primary Phone: _____   E-mail: _____

Other Phone: _____   Country of Citizenship: _____

Title: ☐ Mr.   ☐ Ms.   ☐ Mrs.   ☐ Rev.   ☐ Dr.   Primary Language Spoken: _____

Gender: ☐ Male   ☐ Female   Primary Religious Affiliation: ☐ PAOC

Date of Birth: _____ / _____ / _____   ☐ Other Pentecostal   ☐ Protestant   ☐ Catholic
                    DD   Month   Year
(Example: 05 / JAN / 87)   ☐ Other (Specify) _____

PROGRAM OF STUDY (Select only one)**:**   ☐ **Ministerial Studies**   ☐ **Bible and Doctrine**   ☐ **Undeclared**

PREFERRED FORMAT: ☐ **Printed Copy**   ☐ **Online**

- **I understand that Ministerial credentials are <u>not</u> issued by Global University or Aboriginal Bible Academy.**
- I understand that Berean School of the Bible (BSB) offers non-degree courses, which are calculated in Continuing Education Units, not college credits and that it is my responsibility to verify the applicability of BSB courses toward my educational goals.
- I understand that my completion of this study program does not guarantee my acceptance for any position by any church or organization.
- I agree to adhere to the standards and policies published in the BSB catalog.

Appropriate application fee is included (refer to fee arrangement).   The application fee is non-refundable five business days after this form is received by Global University.

Date: _____ / _____ / _____   Applicant's Signature: _____
        DD   Month   Year
                                    Print Full Name: _____

FOR REGIONAL/NATIONAL OFFICE USE ONLY   BSB IntlApplication - EN 20140131

Date: _____ / _____ / _____   I recommend this student for the institute-level program he or she has indicated.
        DD   Month   YY

National Office Code: _____   Director's Signature: _____

FOR INTERNATIONAL OFFICE USE ONLY

Date: _____ / _____ / _____   I recommend this student for the institute-level program he or she has indicated.
        DD   Month   YY

Global University Registrar's Signature: _____