



BEAR VALLEY BIBLE INSTITUTE OF DENVER

2707 South Lamar Street, Denver, Colorado 80227 • (303) 986-5800

Application Form

Date: _____

Personal Information

Name: _____ Birth Date: _____ Age: _____

Social Security #: _____ Sex: M F Marital Status: Married Single

Place of Birth: _____ Citizenship: _____

Spouse's Name: _____ Spouse's Citizenship: _____

Children Names and Ages: _____

Current Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Telephone: _____ E-mail: _____

Permanent Contact Information

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Telephone: _____ E-mail: _____

If single, have you ever been married? Y N

If Married, have you or your spouse ever been previously married? Y N

If you answered yes to either of the above questions, please give a detailed explanation on a separate sheet of paper.

Have you ever served in the military? Y N If so, did you receive an honorable discharge? Y N

Students and members of students family are not allowed to use tobacco, drugs, or alcohol while attending school. Do you agree to abide by this rule? Y N

Have you been or are you being treated for any physical or emotional problems? Y N

If yes, what kind and when _____

Financial Information

Present Occupation: _____ Present Salary: _____

Present Debt: _____ Debt upon enrollment: _____

Use these guidelines to determine the minimum monthly support needed.

\$1400 per month per couple, plus \$300 per child per month, plus all monthly payments. \$850 per month for single person, plus all monthly payments.

Please attach a recent photo of applicant and one of family member or spouse. Polaroid or snapshot may be used.

Education Information

Educational Background (Circle highest level)

Grade: 9 10 11 12 College: Freshman Sophomore Junior Senior

College graduate level: Associate Bachelor Masters Doctorate

College Major: _____ College hours: _____

Other professional or trade qualifications: _____

What program do you plan to enter?

Two Year program One-Year Certificate of Achievement Studies (special qualifications required)

Non-certificate Study Program

If you wish to receive college credit for any Bible classes, you will be required to send a transcript after you have been accepted.

Church Background

When were you baptized? _____ Where: _____ By Whom: _____

When was you spouse baptized: _____ Where: _____ By Whom: _____

Children baptized? _____ Where: _____ By whom: _____

Name of the congregation where you are presently a member: _____

Address

City

State

Zip

Telephone

References

List the names of three (3) elders or leaders (members of the church of Christ) who have known you for the past three (3) years or since you became a Christian.

Name

Address

City

State

Zip

Telephone

Briefly state why you want to preach the gospel or why you want to attend the Bear Valley Bible Institute.

List support prospects: (VA benefits, congregations, family, interested individuals, savings, etc...)

Please list any friends or acquaintances you would recommend as prospective students for BVBID.

If I am accepted by the Bear Valley Bible Institute of Denver, I will do my best to maintain the highest moral, spiritual, and academic standards possible. I will abide by the policies of the school as I approach the term of study in a serious and prayerful manner.

Signature: _____ Date: _____

Intended date of enrollment: _____ February 20____ September 20____