



Southern Bible Institute & Seminary

Admission's Office

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Phone: (803) 202-1900

Fax: (706) 595-0600

Student Records: (762) 218- 3511

Website: www.southernbibleseminary.org / E-mail: southernbibleseminary@yahoo.com

APPLICATION FOR ADMISSION

I hereby request application to Southern Bible Institute and Seminary (SBIS); whereby, I may "study to show myself approved to God, a workman that need not be ashamed, rightly dividing the Word of Truth."

Name of Applicant: (Dr., Pastor, Rev., Mr., Mrs., Ms.) _____
(First) (MI) (Last)

Date of Birth: _____ Male: _____ Female: _____
(Maiden Name)

Home Address: _____

City: _____ State: _____ Zip: _____

Date of Application: _____ Social Security Number: _____

Home Phone Number: (____) _____ Work Phone Number:(____) _____

Cell Phone Number: _____ E-mail: _____

DESIRED DIPLOMA/DEGREE AND AREA OF STUDY

Please check the degree and the area of study that you are seeking.

*Educational Degrees are not offered for Distant Learning Students and does not lead to teacher certification or licensing

BIBLICAL DIPLOMA: _____

ASSOCIATE DEGREE: (IF YOU DO NOT POSSESS A HIGH SCHOOL DIPLOMA, CHECK HERE. _____)

Biblical Studies _____ Theology _____ Ministry _____

Religious Education _____ Christian Education _____

BACHELOR DEGREE:

Biblical Studies _____ Theology _____ Ministry _____

Religious Education _____ Christian Education _____

MASTER'S DEGREE: (MUST POSSESS A BACHELOR'S DEGREE)

Biblical Studies _____ Theology _____ Ministry _____

DOCTORATE PROGRAM: (MUST POSSESS A MASTER'S DEGREE)

Biblical Studies _____ Theology _____ Ministry _____ Divinity _____

EDUCATIONAL HISTORY

Please list your educational history, starting with the high school attended, then any vocational, college or university, Bible college, or seminary studies completed.

Name of School	City and State	Dates Attended	Degree Major or Area of Study with Number of Credit Hours Earned

MILITARY HISTORY

Branch of Service	Dates of Service	Total Years Served	Status of Discharge
Commission upon Discharge			
Position	Duties		

CHURCH MINISTRY EXPERIENCE

Please complete the following information regarding your relationship with Jesus Christ and the local church you attend.

Name of Church	Number of Years	Positions or Area of Ministry

Please list the Name and Phone number of your current pastor.

I hereby state that all of the information listed on this application is true and accurate as unto the Lord as my witness. I hereby grant permission to Southern Bible Institute and Seminary to verify all of the information listed above. I further agree to and understand that any and all “Earned” Life Credit Hours, Educational Credit Hours, and Ministry Hours based upon this application are granted at the discretion of Southern Bible Institute and Seminary. I hereby agree and understand that I will complete all course requirements as unto the Lord Jesus Christ, and I will comply with all Seminary Policies and Financial Commitments in pursuit of academic excellence in the Word of God. Amen.

*I hereby further understand that all of the courses and degrees of Southern Bible Institute and Seminary are of an ecclesiastical nature and whether granted or conferred are in the restricted area of religion with the special purpose of preparing persons to work in the area of religion—whether Educational or Ministerial—and are **NOT** designed to be used in general academic circles.*

An application fee of \$50.00 (non-refundable) and a recent picture must accompany this application.

Application Fee enclosed: \$ _____ Check or Money Order #: _____

Applicant’s Written Name

Applicant’s Signature

Date

