



1705 Belle Meade Court
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 Lawrenceville GA 30043
 (678) 308-6618
 mylifebibleschool@gmail.com
 www.mylifebibleschool.com

APPLICATION

COMPLETE THIS APPLICATION FOR ADMISSION

When do you plan to attend? Fall Spring Summer Year 20_____

FOR OFFICE USE ONLY	
Date Rec'd _____	Fee Rec'd. _____

Name _____
Last First Middle

Current Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

PERSONAL

Gender: Male Female Marital Status: Single Married Separated Divorced Widowed

Year graduated from high school/GED _____ Date of Birth ____/____/____
Month Day Year Age _____

Social Security Number _____-_____-_____

Country of Birth: _____

Are you a citizen of the U.S.? Yes No

If no, country of citizenship: _____

Are you a resident alien? Yes No

If yes, please include a copy of U.S. government authorization (green card or other)

SPIRITUAL

When did you accept Christ as your personal Savior? ____/____
Month Year

Have you had an Acts 2:4 experience? Yes No

Do you attend church regularly? Yes No

Are you a member of your church? Yes No

State any type of Christian service you have done: _____

Home church/denomination _____

Pastor's name _____ Phone (_____) _____

Address of church _____

FAMILY

Spouse:

If married, name of spouse _____ Birth date ____/____/____ Age _____
Occupation _____

Children: (please answer the following for children living with you):

Name _____ Birth date _____ M F
Name _____ Birth date _____ M F
Name _____ Birth date _____ M F
Name _____ Birth date _____ M F

EDUCATION

High school _____ Dates attended _____ Did you graduate? Yes No
College _____ Dates attended _____ Course of study/degree conferred _____
Other _____ Dates attended _____ Course of study/degree conferred _____

EMPLOYMENT EXPERIENCE

Current employer: _____
Address of employer: _____

HISTORY

Have you used or are you currently using illegal drugs? Yes No If yes, date of last use? _____
If yes, explain: _____
Have you ever been arrested? Yes No If yes, when? ____/____/_____
Were you convicted? Yes No (If yes, attach brief explanation)

AGREEMENT

I hereby certify that I have read and accepted the Objectives and Standards of Life Bible School:

Applicant's Signature Date

Life Bible School reserves the right to require the withdrawal of any student who is considered to be out of harmony with the standards of the institute.