

APPLICATION PACKET

1358 MORRIS AVENUE BRONX NY 10456 718-588-2284

APPLICATION INSTRUCTIONS

Please note that the Admissions office will begin evaluation only when all application forms are complete. This application packet contains: a) an application for admission; b) an autobiographical sketch form; c) doctrinal statement form; d) one Pastor's Reference form.

- 1. Application for Admission
- 2. Doctrinal Qualification for Students
- 3. Autobiographical Sketch
- 4. Pastoral Reference

Upon completion, please print or email to: institute@thebiblechurchofchrist.org

Mailing Address: 1358 Morris Ave Bronx NY 10456

BCCTI Application for Admission Please print in ink.

A. Enrollment Information

1.	Legal Name:	LAST	FIRST		MIDDLE INITIAL	
С	Former Name(s):	LAST	FIRST		MIDDLE INTIAL	
		LAST	FIRST		MIDDLE INITIAL	
3.	Date of Birth:	_ / /YEAR	4. 🗌 Male 🗌] Female		
5.	Social Security Num	oer: — —				
6	Address:					
0.	LEGAL					
	STREET		APARTMENT#			
	CITY / TOWN / VI	ILLAGE	STATE		ZIP	
	MAILING		APARTMENT#			
	SIREEI		APARTMENT#			
	CITY / TOWN / VI	ILLAGE	STATE		ZIP	
7.	Telephone:			Emergency Contact:		
	HOME					
	MOBIL F			NAME		
	By providing your mobil	le number you are giving perr	nission	PHONE	· —	
	to the college to send yo	ou text message notifications.				
8.	Email Address:					
					, room changes, etc. Please be sure	
notif	y us if any of your contact	t information changes. Chang	es to your personal inforn	nation (including contact info	ormation or a change of address) c	an be
в. Re	esidency Informa	tion				
	-	w York State for the past 1:	2 months? 🗌 Yes	No If no,		
	-					
10				lt no, coun	TY OF RESIDENCE	
	I have been a residen	t of New York State since	(MM/DD/YYYY)	/ /	_	
, use	8 3H1-920/			1358 MORRIS AVEN		

The Bible Church of Christ Theological Institute

C. Citizenship Information

11. Are you a US Citizen? 🗌 Yes 🗌 No 🛛 If no, country of citizenship
If you are not a U.S. Citizen, please complete the box below.
NON US CITIZENS
12. Are you a legal permanent resident of the United States? 🗌 Yes 📄 No
If yes, please provide your Alien Registration Number — — —
13. Do you hold an F1 visa? 🗌 Yes 🔲 No
• If No, do you wish to apply for a student (F1) visa? 🗌 Yes 🗌 No 🛛 Please contact the International Student Office at 914-606-8567.
• If you have an F1 visa from another school, you must go through the International Student Office and complete the process.
• Students who are granted a student (F1) visa must enroll and attend full-time (12 or more credits).
14. Do you hold a visa other than F1? 🗌 Yes 🗌 No
□ B1 □ B2 □ J1 □ H □ Other
D. Regional Information 15. Ethnicity
A variety of government agencies require that institutions of higher education report student enrollments by ethnic status. The information requested in this section will assist us in meeting this requirement. Please check the appropriate box. (Response is optional and will not affect your admission in any way.)

Are you Hispanic/Latino? 🗌 Yes 🔲 No					
If Hispanic/Latino, please indicate which of the following would best describe your background? (select one)					
🗌 Cuban 🔹 Dominican 📄 Other Hispanic/Latino					
🗌 Puerto Rican 🗌 Mexican					
Please indicate your race (select one or more)					
🗌 American Indian or Alaskan Native	🗌 Asian 🛛 🗌 Black or African American				
Native Hawaiian or other Pacific Islander	□ White				
16. Military Status					
Have you ever served in the United States Military? 🛛 🗌 Yes 🗌 No					
If yes, please indicate current military status	Active Military Duty Retired Veteran				
	Dependent of Active Duty Personnel Other				
E. Educational Goal					
17. I am applying as a: 🗌 Freshman 🛛 Transfer					
18. I plan to begin my studies: 🗌 January 20 (spring) or 🗌 September 20 (fall)					
19. I plan to study: 🗌 Full-time (12 OR MORE CREDITS)	Part-time (1-11 CREDITS)				
20. On the line below, please indicate your intended majo	r from the list of Degree & Certificate Programs included in				
this application					

21. Check if you would like more informatio	5	9		
	Center	Military Veter		
Scholarships Transfe	er Services	Educational (Opportunity Pro	gram
F. Academic History (final/official tr				
Did you, or will you graduate from high :	school? 🗌 Yes	□ No (If no, pleas	se proceed to q	uestion 25)
22. High School:				
CITY			STATE	
23. Graduated High School /	Will Grad	duate High School _	/	EAR
				EAR
24. Type of high school diploma received of				
*A student who completes high school v Please contact the Office of Admissions				
25. If you did not graduate from high schoo		0		Certificate/Diploma?
Yes DATE ISSUED /				
MONTH YEA				
			4-credit OLD pr	ogram
I was homeschooled				
26. Transfer Students ONLY List all other colleges attended (most re	cont first)			
College/University Cit	,	Dates Attended FROM	(MM/YY)	Degree Received
		FROM	то /	
		/	/	
		/	/	
		/	/	
NOTE: It is your responsibility to send official co	ollege transcripts, CLEP, and/	or Advanced Placemen	, t	
27. Check if you would like more information		-		
Financial Aid Career		Military Vetera		740 000
Scholarships Transfe	er Services	L Educational (Dpportunity Prog	gram

G. Additional Information

28. Have you ever been dismissed from a college for academic reasons? 🛛 🗌 Yes 🗌 No				
29. Have you ever been suspended, expelled, and/or dismissed from a previous educational institution college, university, high school, vocational school, etc.) for disciplinary (non-academic) reasons?				
Response to the following questions is optional and will not affect your admission in any way.				
30. Has any member of your family graduated? If yes, what relationship? Parent Sibling Other Name:				
31. Was English your primary language spoken as a child? ☐ Yes ☐ No If no, please indicate your primary language If no, would you like information on the ESL program? ☐ Yes ☐ No				
32. Please indicate the highest level of education earned by your parent(s) Parent 1				
☐ HS ☐ Some College ☐ 2 yr College Degree ☐ 4 yr College Degree ☐ Master's or higher ☐ Other Parent 2				
🗌 HS 🗌 Some College 🗌 2 yr College Degree 🗌 4 yr College Degree 🗌 Master's or higher 🗌 Other				

H. Applicant's Signature

I certify that the information provided on this application is complete and accurate in every respect. I understand that falsifying any part of this application may result in cancellation of my admission or dismissal from the college. I am aware that the \$35 application fee (enclosed as a check or money order) is non-refundable.

Signature of Applicant	Date	/	/
Signature of Applicant	Dutc /	/	

CHECK BELOW THE COURSE(S) YOU WOULD LIKE TO TAKE THIS SCHOOL YEAR:

GED Program	Acts/Life of Paul	Teachers Training
New Converts	Post Graduate I	Teachers Training II
Christian Workers	Post Graduate II	Advanced Church History
Evangelism	Advanced Pedagogy I	Christian Leadership
Advanced Evangelism	Advanced Pedagogy II	Josephus Class
General Bible I	Soul Winning	Demonology
General Bible II	Spanish	Other
Bible Study & Lectures	Youth Expression	Other

Degree Programs

Associates in Biblical Studies 70 Credit Hours (1.5 year) Bachelor of Biblical Studies 140 Credit Hours (3 year) Master of Biblical Studies 210 Credit Hours (5 year)

Associates in Theology 70 Credit Hours (1.5 year) Bachelor of Theology 140 Credit Hours (3 year) Master of Theology 210 Credit Hours (5 year)

***Rates ONLY \$100 per credit hour



DOCTRINAL QUALIFICATIONS FOR STUDENTS

***Students are to live, by the aid of the Holy Spirit, according to the moral, spiritual, and ethical standards of the New Testaments. Students should be modest in appearance and abstain from foul or abusive language. The Bible Church of Christ Theological Institute is an environment that is as conducive to personal connection as it is to higher learning. Our diverse community of undergraduate and graduate students make the most of BCCTI experience by participating in student organizations, volunteer initiatives, spiritual opportunities, and campus activities unique. The Hub for Spiritual Life engages the Pepperdine community in vibrant and consistent experiences of worship and spiritual care.

Students (to be admitted and to graduate) must agree with, personally adhere to, and support the following doctrines:

- We believe the Authorized King James Bible is the preserved Word of God.
- We believe the Great Commission was given by our Lord Jesus Christ to the Church.
- We believe any sinner can be saved and transformed by the grace of God.
- We believe "repentance toward God, and faith toward our Lord Jesus Christ" (Acts 20:21) are necessary for salvation.
- We believe church members should have a desire to be Christ-like in their daily living.
- We believe in the pre-millennial return of our Lord and Savior Jesus Christ. Do you agree with, personally adhere to, and support the above stated doctrinal positions?

🗆 Yes 🛛 🗅 No

Applicant's signature _____

Date _____

APPLICANT'S SIGNATURE IS REQUIRED FOR FURTHER PROCESSING OF THE APPLICATION.



AUTOBIOGRAPHICAL SKETCH

(Please type the information)

NAME OF APPLICANT _

Your essays are a significant part of the application process and provide us an opportunity to learn more about you. Please limit your response for each essay to 750 words or less. It is important that this is your own work and is factually correct.

1. Describe your home and spiritual life by summarizing your own sense of God's work in your life, how he has been shaping you and who he is calling you to be. Include your understanding of and experience of spiritual direction, both received and given, why you are interested in the certificate, and your vision of and current supportive experience of the place of Christian community in this calling and training.

My signature below indicates that all the information contained in the above essays (and on any additional sheets) is factually correct and truthfully presented.

Applicant's Signature_____ Date_____

An unsigned sheet cannot be processed and will be returned.



Spiritual Formation Certificate Pastoral Reference

This portion is to be completed by the applicant:

Name of Applicant	
Name of Pastor	Pastoral Position
	NT: Thank you for taking the time to fill out this application. We realize your time is valuable and we appreciate your or and more factual you can be enables us to serve the applicant in the best way possible.
1. Is the applicant a member	of an evangelical Protestant church? 🛛 Yes 🗌 No
2. How long have you known	the applicant? years months
3. In what capacity?	

4. Has the applicant been active in Christian service? \Box Yes \Box No

5. If so, in what way?

6. Does the applicant show interest in spiritual things? \Box Yes \Box No

7. If so, in what way?

8. In your opinion, is the applicant's lifestyle consistent with biblical teaching? \Box Yes \Box No

9. Do you recommend that we accept this applicant? \Box Yes \Box No

10. Do you have any additional comments?

Pastor's name (please print)			
Pastor's signature			Date
Church and denominational affiliation			
Address	City	_ State	ZIP code
Phone ()			

Please return the reference to the applicant in the envelope provided. Seal the envelope and sign across the seal.