**Enrollment Form**

**Biblical Study Theological Seminary**

**Baptist Bible College**

Mail Enrollment Form to: 633 Clem Lowell Rd., Carrollton, Ga. 30116

Phone: (770) 361-1220

President: Dr. Clay Pawley, Th. D., Ph. D.

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthday (MMDDYY)\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Legal Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:

Home Phone:

Cell Phone:

E-Mail­­­­­­­­­­­­­­­:

What church are you a member of?

Do you attend church regularly and faithfully?

Please check one of the following:

I wish to study for a degree\_\_\_\_\_\_\_\_

I wish to study for the education only (no degree) \_\_\_\_\_\_\_\_

What degree level do you seek? (Associate, Bachelor, Masters, Doctor)

**Previous Education Information:**

Have you received a High School diploma or GED? \_\_\_\_\_\_\_

On a separate piece of paper write down your previous education information and attach to this form. Please include High School or GED, and College. Please list all schools attended and degrees if any. A High School diploma or GED (or equivalent) is required for graduation from the Biblical Study Theological Seminary and Bible College, but not required for Institute studies.

**Life Experience:** List your places of Christian service, including pastorate, associate pastor, Sunday school teacher, evangelism, missions, children’s ministries, etc., and the amount of years served. Include titles and positions. Write this on a separate piece of paper and attach to this form. In most cases students can receive some credits for life experience.

**Agreement:**

I fully understand the cost of tuition and payment requirements and have also read the Doctrinal Statement of the Biblical Study Theological Seminary and fully agree to all terms, school beliefs, and by-laws. I certify that all information given is true and complete to the best of my knowledge. I understand that false information can lead to my dismissal from school.

Student’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_