

Dear Student,

Congratulations on your decision to attend Desert Baptist Bible College. We have prepared a check-list to help you through the important paperwork/application process.

First-Time Students

If you are attending Desert Baptist Bible College for the first time, please use the following checklist when applying. We would ask that your application arrive a minimum of 30 days before registration.

- Completely fill out an Application for Admission form and attach a recent photograph.
- Mail the application to the college along with a \$25 application fee, which is non-refundable.
- Each student must have three reference forms submitted (Pastoral and two Personal).
- Request the high school from which you graduated to send a copy of your transcript to the Registrar. If you have not yet graduated, request the high school to send a transcript of your course work completed up until the current semester. If you passed the GED, please have an official copy of the results sent directly to the Registrar's office.
- Request that your ACT or SAT test scores be sent to the Registrar's office as soon as possible. See the catalog for further details.

Transfer Students

- Follow all steps under First-Time Students.

Request each institution of higher education which you have attended to send a complete transcript to:

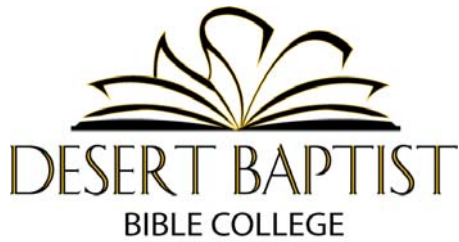
Registrar
Desert Baptist Bible College
170 E. Pony Lane
Gilbert, AZ 85295

Upon receipt of the above information, Desert Baptist Bible College will notify you in writing of your standing and will send you more information.

All Students

- Be prepared to pay your initial registration, fees, and tuition/housing. See the catalog for further details.
- Be prepared to pay for books and other items needed for the semester.

Come with a great attitude and ask God to bless you!



DESERT BAPTIST BIBLE COLLEGE

170 E. Pony Lane
 Gilbert, Arizona 85295
 (480)424-2357
 www.desertbbc.org

APPLICATION FOR ADMISSION

Important: Please PRINT or TYPE. ANSWER ALL QUESTIONS. Applications will not be processed nor academic standing be assessed unless all questions are answered and the application signed and dated by applicant. Do not leave any question blank. Put "N/A" if an item, such as a cell number or email address, does not apply. Please attach a current photo and enclose a check payable to Desert Baptist Bible College for \$25.00. This is a non-refundable administrative fee.

1. PERSONAL INFORMATION

TITLE: <input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MISS <input type="checkbox"/> DR <input type="checkbox"/> REV		LAST NAME:		FIRST NAME:		MIDDLE INITIAL		<input type="checkbox"/> SR. <input type="checkbox"/> JR. <input type="checkbox"/> Other	
MAILING ADDRESS:				CITY:		STATE / PROVINCE		ZIP / POSTAL CODE:	
HOME PHONE # ()			WORK PHONE # ()			CELL PHONE # ()			COUNTRY
BIRTHDATE (MM/DD/YYYY)		SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	SOCIAL SECURITY #		MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> DIVORCED <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED		MAIDEN NAME, IF APPLICABLE		
PLACE OF BIRTH:		OCCUPATION:		WILL YOU BE A: <input type="checkbox"/> Full-time Student (12+ hours) <input type="checkbox"/> Part-time student		E-MAIL ADDRESS:			
U.S. CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO, IF NO, WHAT COUNTRY?			CHURCH MEMBERSHIP:		CHURCH CITY / STATE		PASTOR'S NAME: ***		
PERSON TO NOTIFY IN CASE OF EMERGENCY:				RELATIONSHIP:		PHONE # ()			

2. MINISTRY EXPERIENCE

CURRENT MINISTRY STATUS, IF ANY: <input type="checkbox"/> SENIOR PASTOR <input type="checkbox"/> MISSIONARY <input type="checkbox"/> YOUTH MINISTER <input type="checkbox"/> CHAPLAIN <input type="checkbox"/> CHURCH/MINISTRY ADMINISTRATOR <input type="checkbox"/> ASSISTANT PASTOR <input type="checkbox"/> EVANGELIST <input type="checkbox"/> CHILDREN'S MINISTER <input type="checkbox"/> MUSIC MINISTER <input type="checkbox"/> LAY MINISTER <input type="checkbox"/> OTHER					
ARE YOU CURRENTLY LICENSED OR ORDAINED? <input type="checkbox"/> LICENSED <input type="checkbox"/> ORDAINED <input type="checkbox"/> N/A		CREDENTIALING ORGANIZATION:	PAST MINISTRY INVOLVEMENT <input type="checkbox"/> PASTORAL <input type="checkbox"/> EVANGELISM <input type="checkbox"/> TEACHER <input type="checkbox"/> RADIO/TV <input type="checkbox"/> OTHER		NUMBER OF YEARS IN MINISTRY

3. EDUCATIONAL INFORMATION

HIGH SCHOOL *		STOP DATE (MM/DD/YYYY)		STUDY EMPHASIS:	DID YOU GRADUATE? <input type="checkbox"/> YES <input type="checkbox"/> DIPLOMA <input type="checkbox"/> NO <input type="checkbox"/> GED
SCHOOL NAME: **		START DATE (MM/DD/YYYY)	STOP DATE (MM/DD/YYYY)	MAJOR:	DIPLOMA / DEGREE EARNED

ALL EDUCATIONAL BACKGROUND MUST BE SUPPORTED BY THE FOLLOWING DOCUMENTATION:

* List school including Bible Institutes, Bible Colleges, other Colleges or Universities. You must have original, sealed, official transcripts sent directly to the Registrar's office.

** If you have not attended college, you must send a photocopy of your high school transcript, diploma, or GED.

*** A pastoral reference must be sent to this office.

NOTE: It is the applicant's responsibility to order, pay for, and – if necessary – follow-up on all transcripts ordered. We cannot process this application without transcripts.

4. SALVATION TESTIMONY

PLEASE STATE YOUR SALVATION TESTIMONY:

5. EDUCATIONAL & MINISTRY GOALS

PLEASE BRIEFLY STATE YOUR EDUCATION AND MINISTRY GOALS



Non-Discrimination Policy - Desert Baptist Bible College does not discriminate on the basis of nationality, ethnic origin, age, or sex. We guarantee the rights and privileges, and the availability of programs and activities to all students of the College.

Privacy Rights of **Students** STATUTE 20, UNITED STATES CODE, 1232g and regulations adopted pursuant thereto. The code provides for an institution to establish a category of student information termed "directory information." All information, such as health and medical records, disciplinary records, records of personal counseling, required student and family financial income information records, transcripts or student permanent academic records, student placement records and other personally identifiable information shall be open for inspection only to the student and such members of the professional staff of the college as have responsibility for working with the student. Such information will not be released to second parties without consent of the student. Except as required for use by the president in the discharge of his official responsibilities as prescribed by laws, regulations of the state board, and board policies, the designated custodian of such records may release information from these records to others only upon authorization in writing from the student or upon a subpoena by a court of competent jurisdiction.

PLEASE READ CAREFULLY THE FOLLOWING AFFIDAVIT OF AGREEMENT BEFORE SIGNING

1. I certify that I have truthfully and accurately answered all questions contained in this application. I understand that falsification of any kind is grounds for refusal of my application or expulsion should falsehood be discovered after acceptance to the College.
2. I indicate by my signature that I have been notified of my rights as recorded by Statute 20, United States Code 1232g.
3. I understand that Desert Baptist Bible College is a ministry of the Desert Gateway Baptist Church, and as such, falls under the Constitution and By-Laws of Desert Gateway Baptist Church.
4. I certify by my signature that I agree to abide by the policies of this institution as described in the College Catalog, and that I am sincere in my intent to develop my Christian character and will obey my instructors and be a blessing to the College.
5. I acknowledge that Desert Baptist Bible College is not a job placement service and makes no claims regarding employment.

Signature

Printed Name

Date

PERSONAL REFERENCE FORM

for admission to
Desert Baptist Bible College

Applicant's Name _____

Semester of Planned Enrollment: [] Fall [] Spring [] Summer of 20____

SPECIAL NOTES FOR APPLICANT:

- 1. This reference should be completed by a person who is not a relative.
2. This reference should be completed no more than fifteen (15) months before you plan to enroll.

Table with 6 columns: Trait (Christian Character, Dependability, Cooperation, General Intelligence, Ability to Get Along with Others) and 6 rating options (Excellent, Good, Average, Poor, Unknown).

In considering this applicant, would you recommend him/her?

[] With enthusiasm [] Yes [] With caution* [] No* *Please state reason on the back of this sheet.

NOTE: Applicants recommended "With Caution" MAY still be considered for admission.

How long have you known this applicant? _____

Does this applicant pay his/her bills on time? [] Yes [] As far as I know [] No [] Unknown

Would you hire this applicant to work for you? [] Yes [] No If no, please explain: _____

Is this applicant the kind of person with whom you would want your son or daughter to be close friends?

[] Yes [] No If no, please explain: _____

If this applicant has not finished high school, when do you expect he/she will finish (month / year)? _____

Do you believe that this applicant is able to handle the normal college workload, activities, and requirements?

[] Yes [] No If no, please explain: _____

Does this applicant have any handicaps or disabilities? [] Yes [] No If yes, please explain: _____

Does this applicant have any significant factors in his/her background of which we should know? [] Yes [] No

If yes, please explain: _____

Name of Reference _____ Your relation to the applicant _____

Signature _____ Date _____

Mailing Address _____

Phone Number (_____) _____
Area Code

SPECIAL NOTES:

- 1. This reference form is to be submitted directly to the Admissions Office by mail or by fax.
2. This reference form is not to be returned to the applicant.
3. If this recommendation changes before the applicant enrolls, please notify the Admissions Office.
4. The back of this reference form may be used for additional comments.

TRANSCRIPT RELEASE FORM

for admission to
Desert Baptist Bible College

The following student has applied for admission to Desert Baptist Bible College. They are requesting that their

- college transcript
- high school transcript

be sent to the Admissions Office at Desert Baptist Bible College. Please return this form with the transcript to the following address:

Desert Baptist Bible College
Admissions Office
170 E. Pony Lane
Gilbert, AZ 85295

PERSONAL INFORMATION

(To be completed by the student only)

Name: _____
(Last) (First) (Middle / Maiden)

Address: _____
(Address) (City) (State) (Zip)

Social Security #: _____ Date of Birth (mm/dd/yyyy): _____

Graduation Date (mm/dd/yyyy): _____ Semester/Year last attended: _____

Name at time of enrollment if different from above: _____

I grant permission and make request for my school, _____
to send my academic transcript and personal records to:

Desert Baptist Bible College

Please include ACT, SAT, and any other standardized test scores, if available.

Student Signature: _____

Parent Signature: _____
(Required if the student is under 18 years of age)

***** SPECIAL NOTE TO HIGH SCHOOLS *****

If this student is currently a high school senior, please send us a partial transcript of his/her first seven semesters. Upon this student's graduation, please send the final semester transcript so that we will have a COMPLETE transcript for his/her file. The transcript must include the student's date of graduation to be considered final. Please include the official school seal/signature.

If you have any questions, please call our Admissions Office at (480) 424-2357
Thank you for your assistance.