



Application For Enrollment

Please Fill Out Completely and Legibly

Name _____ Birth Date _____
Address _____ City _____
State _____ Zip _____ Phone _____

Church _____ Pastor _____ Church Phone _____

Church Address _____ City _____ State _____ Zip _____

Employer _____ How Long? _____ Position? _____

Single _____ Married _____ Spouse's Name _____

Previous Marriage(s) _____

Children's Names / Ages _____

Are you born again according to John 3:3 and Romans 10:9-10? _____

Date this occurred _____ Briefly explain your experience _____

Have you been water baptized? _____ When/Where? _____

Briefly explain why you believe the Lord is directing you to attend Lakewood Bible College? _____

Educational History

High School attended _____ Year Graduated or highest grade attained _____

College attended _____ Year Graduated or number of years attended _____

College attended _____ Year Graduated or number of years attended _____

www.LakewoodBibleCollege.org

15513 Detroit Ave. * Lakewood, Ohio 44107 - (216) 221-6174

Do you have a definite call of God on your life to enter FULL-TIME MINISTRY? _____

Are you _____ Licensed? _____ Ordained? Denomination/Organization _____

Identify the area(s) of ministry into which you believe God is calling you:

_____ Pastor _____ Evangelist _____ Missions
_____ Helps _____ Teacher-Adults _____ Teacher-Youth
_____ Teacher-Children _____ Music-Vocal _____ Music-Instrumental

Designate activities in which you have been involved:

_____ Pastor _____ Revivals/Preaching _____ Coffee-House
_____ Associate Pastor _____ Media Ministry _____ Visitation Ministry
_____ Minister of Music _____ Teaching Seminars _____ Church Administration
_____ Minister of Education _____ Pioneered a Church _____ Conduct Funerals/Weddings
_____ Missionary Work _____ Church Construction _____ Teaching-Adults
_____ Evangelist _____ Street Ministry _____ Teaching-Youth
_____ Radio/TV _____ Prison Ministry _____ Teaching-Children
_____ Writing/Publications _____ Hospital Visitation _____ Prayer Group Leader
_____ Formed a Non-Profit Corp. _____ Nursing Home Ministry _____ Other _____

Personal References:

Name _____ Name _____
Address _____ Address _____
City _____ State _____ Zip _____ City _____ State _____ Zip _____
Phone (____) _____ Email _____ Phone (____) _____ Email _____

Do you believe you will be able to maintain proper priorities of God, spouse, children, church and job while attending LBC? _____

Will you meet your personal and school financial responsibilities? _____

Is your spouse in agreement with your decision to attend LBC? _____

The following should be read carefully before signing:

I agree to follow all policies, rules, and regulations of Lakewood Bible College. I do not and will not use alcohol, tobacco or illegal drugs while I am a student of Lakewood Bible College. I do not and will not participate in any form of illicit sex. I am in sound physical and mental health and am able to meet my obligations as a student without the assistance of others. I feel that God has led me to apply to Lakewood Bible College and intend to do my best to answer that call.

Signature _____ Date _____

Spouse's Signature _____ Date _____

New Applicants - Please enclose a \$35.00 application fee with completed application and Pastor/Minister Recommendation form. Re-Application fees are waived for all students completing as least one course in the last year.

LBC must receive this completed form with application fee and completed ministers recommendation form before school acceptance can be determined. Students will be notified by phone, email or mail.

www.LakewoodBibleCollege.org

Please mail completed application to:

Lakewood Bible College
PO Box 770085
Lakewood, OH 44107